|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **附件二:**  **大埔县人民医院设备采购报名产品明细表** | | | | | | |
| **序号** | **产品名称** | **产品型号** | **产地** | **生产厂家** | **注册证号** | **备注** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

报名经销商：

报名日期：