附件3

征求意见反馈单

**单位名称： 联系人： 联系电话：**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 序号 | 章条编号 | 修改意见 | 修改理由或依据 | 备注 |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
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