附件

|  |  |  |  |  |  |  |  |  |  |
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| **台山市动物卫生监督所“盐酸克伦特罗、莱克多巴胺、**  **沙丁胺醇”三联速测卡报价单** | | | | | | | | | |
| **供货商名称（盖章）：** | | | | | | | | | |
| **地址：** | | | | | | **报价人：** | |  | |
| **电话：** | | | | | | **电话：** | |  | |
| **传真：** | | | | | | **日期：** | |  | |
| **网址：** | | | | | | **报价有效期：** | |  | |
|  | | | | | | | | | |
| **采购单位：** | 台山市动物卫生监督所 | | | | | **电话：** | | 0750-5501700 | |
| **联系人：** | 王先生 | | | | |  | |  | |
| 我们很高兴向您（及贵单位）报以下产品的价格 | | | | | | | | | |
| **序号** | **货物名称** | **规格型号** | **品牌** | **数量** | **单位** | **单价（元）** | | **总价（元）** | **备注** |
| 1 |  |  |  |  | 条 |  | |  |  |
| 2 |  |  |  |  |  |  | |  |  |
| 3 |  |  |  |  |  |  | |  |  |
|  | | | | | | | |  | |
| 备注： | | | | | | | | | |
| 1.质保期：从交货日起按照不同货物各自的质保期进行质保 | | | | | | | | | |
| 2.税和运费：含运费,含发票 | | | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |