附件3：

意见反馈表

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 联系人姓名 |  | 联系手机 |  | E-mail |  |
| 所在单位名称 |  | | | 所在单位职务 |  |
| 条款编号 | 修改建议 | | 修改理由 | | |
|  |  | |  | | |
|  |  | |  | | |
|  |  | |  | | |
|  |  | |  | | |
|  |  | |  | | |
|  |  | |  | | |
|  |  | |  | | |
|  |  | |  | | |
|  |  | |  | | |
|  |  | |  | | |
|  |  | |  | | |
|  |  | |  | | |
|  |  | |  | | |
|  |  | |  | | |

（可附页）

填写日期：2025年 月 日