|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **报价单** | | | | | | | | | | | |
| 广西国际壮医医院： | | | | | | | | | | | |
| 我公司拟对以下产品进行报价，对本次的产品我们将按质按量提供，此产品的报价是含税价，联系人及联系方式：XXX，XXXXXXX | | | | | | | | | | | |
| 序号 | 品名 | 规格参数 | 单位 | | 数量 | | 单价 | | 金额 | 厂家 | 备注 |
| 1 |  |  |  | |  | |  | |  |  |  |
| 2 |  |  |  | |  | |  | |  |  |  |
| 合计 | | | | | | | | |  |  |  |
|  |  |  | |  | |  | |  |  |  |  |
|  |  |  | |  | |  | | 供货单位（盖章）：XXX公司 | | | |