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| --- | --- | --- | --- | --- | --- | --- | --- |
| **招标项目编号** | **202104001** | | **报名日期** | | |  | |
| **项目名称** | **内蒙古自治区残疾人辅助器具资源中心经济责任审计** | | **招标方式** | | **竞争性谈判** | | |
| **报名单位名称** |  | | | | | | |
| **地址（营业执照）** |  | | | **邮编** | | |  |
| **投标人** | **姓名** | **身份证号码** | | **联系电话** | | |  |
|  |  | |  | | |  |
| **拟报价格（万元）** |  | | | | | | |

**投标报名登记表**