附件2

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **意见反馈表**  填表日期：   年  月  日 | | | | | | |
| **提出意见的单位和个人** | | | | | **修改意见和建议** | **理由** |
| **单位名称** | **个人名称** | **通讯地址和邮编** | **联系电话** | **邮箱** |
|  |  |  |  |  | 例如：第二（三）……建议修改为：…… |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

　备注：可另附页