附件

询价采购供应商报价函

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| 乌海市红十字会采购供应商报价函 | | | | | | | | | | |
| **序号** | **物品名称** | **数量** | **规格型号** | **执行标准** | **品牌** | **生产企业** | **交付时间** | **单位** | **单价（元）** | **总价（元）** |
| 1 | 血液成分分离机 | 1 | Trima |  | Terumo BCT |  |  | 台 |  |  |
| 合 计（元） | | | | | | | | | |  |