附件

**福建省医疗设备购置信息公开情况登记表**

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| **序号** | **购买单位** | **设备名称** | **生产厂家** | **规格型号** | **供货单位** | **购置价格（万元）** | **购置时间** | **主要配置** | **保修年限** | **医疗器械注册证号** |
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注：1. 所填医疗设备为单（台）套设备。2. 所填信息应于中标结果一致。