温州医科大学附属眼视光医院合同签批单

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 合同编号 | |  | | 部门编号 | | |  | |
| 拟签合同名称 | |  | | | | | | |
| 采购编号 | |  | | | | | | |
| 甲方 | |  | 乙方 | | |  | | |
| 主办部门 | |  | 经办人 | | |  | | |
| 合同摘要 | 合同标的物名称 | | | | | | | |
| 数量 | | | | | | | |
| 金额 | | | | 是否预算内 | | |  |
| 合同期限 | | | | | | | |
| 其他 | | | | | | | |
| 签字栏 | 主办部门意见 | | 会签部门意见 | | | | | |
|  | |  | | | | | |
| 法务办审核意见 | | | | | | | |
| 分管领导审核意见 | | | | | | | |
|  | | | | | | | |
| 分管财务领导审核意见 | | | | 财务总监审核意见 | | | |
|  | | | |  | | | |
|  | 法人代表审批意见 | | | | | | | |