様式第4号

**質 疑 書**

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| 住 所 |  |
| 商号又は名称 |  |

No.

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| 入札物件 | 壊死組織等切除用デブリードマン装置の購入 |
| 納入場所 | 国保中央病院　皮膚科外来 |

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| № | 質 疑 内 容 | 回 答 内 容 |
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