附件2

農產品農藥殘留自主檢驗計畫送樣單

**註：粗框表格由本公司填寫**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 基本資料 | | | | | | | | | | | |
| 申請單位 (供應代號) | | | |  | | | | | | | |
| 聯絡人 | | | |  | | 聯絡電話 | |  | | | |
| 檢驗報告及發票 寄送地址 | | | |  | | | | | | | |
| 發票抬頭 | | | |  | | E-mail | |  | | | |
| 統一編號 | | | |  | | 傳真 | |  | | | |
| 檢驗報告領取方式 | | | | □ 傳真 □ E-mail □ 自取 | | | | | | | |
| 送樣清冊 | | | | | | | | | | | |
| 序號 | 供應代號 | | 採樣日期 | | 樣品名稱(品名代號) | | | | 允收(✓/X) | | 顧客樣品編號 | |
| 1 |  | |  | |  | | | |  | |  | |
| 2 |  | |  | |  | | | |  | |  | |
| 3 |  | |  | |  | | | |  | |  | |
| 4 |  | |  | |  | | | |  | |  | |
| 5 |  | |  | |  | | | |  | |  | |
| 6 |  | |  | |  | | | |  | |  | |
| 7 |  | |  | |  | | | |  | |  | |
| 8 |  | |  | |  | | | |  | |  | |
| 9 |  | |  | |  | | | |  | |  | |
| 10 |  | |  | |  | | | |  | |  | |
| 11 |  | |  | |  | | | |  | |  | |
| \*如表格不夠，請填報另一張 | | | | | | | | | | | | |
| 收樣日期 | | 收樣人 | | | 課長 | | 副理 | | | 經理 | | |
|  | |  | | |  | |  | | |  | | |