附件2：

青海省保健食品行业协会

保健食品经营企业备案品种登记表

青协健备字（      ）第    号

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 登记企业名称 | |  | | | 经营地址 | |  | | |
| 备案登记产品 | | | | | | | | | |
| 序号 | 产品名称 | | 批准文号 | 文号持有者 | | 生产企业名称 | | 规格 | 保健功能 |
|  |  | |  |  | |  | |  |  |
|  |  | |  |  | |  | |  |  |
|  |  | |  |  | |  | |  |  |
|  |  | |  |  | |  | |  |  |
|  |  | |  |  | |  | |  |  |
|  |  | |  |  | |  | |  |  |
|  |  | |  |  | |  | |  |  |
|  |  | |  |  | |  | |  |  |
|  |  | |  |  | |  | |  |  |
|  |  | |  |  | |  | |  |  |
|  |  | |  |  | |  | |  |  |
|  |  | |  |  | |  | |  |  |
|  |  | |  |  | |  | |  |  |
|  |  | |  |  | |  | |  |  |
|  |  | |  |  | |  | |  |  |
| 审查意见：    经过核查，同意备案，自备案之日起，有限期壹年。  年 月 日 | | | | | | | | | |