附件5

河北省数字化转型贯标服务机构推荐汇总表

**推荐单位（盖章）：** 联系人： 电话：

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **序号** | **服务机构名称** | **主要服务行业** | **联系人及职务** | **联系方式（手机）** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |
| 9 |  |  |  |  |
| 10 |  |  |  |  |