观 察 项（建议项） 报 告

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| **受审核方** | | **成都爱天使健康咨询有限公司** | |
| **审核领域及类型** | | **■QMS****□50430****■EMS****■OHSMS****□EnMS****□**FSMS **□**HACCP  **□初审□第( )阶段审核****□再认证****■监督（****一）次□证书转换****□特殊审核□其他** | |
| **序号** | **观察项（建议项）描述** | | **备注** |
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