行政许可(行政确认)申请材料真实性保证声明

Statement of Guarantee on the Authenticity of the Information Submitted

申请事项 Topics to be applied	药品委托生产
申请人 applicant	企业名称(或姓名): Name: <u>江苏康缘阳光药业有限公司</u> 身份证号: ID number: (如属于企业申请划 "/"。In the case of enterprise application, please fill "/".)
承诺事项	
Guarantee	
我(们)保证:	
We (personality or th	e enterprise)guarantee:
1、本申请遵守国家法	律法规规章和有关规定。
	onducted in accordance with the national law and regulations in
involved.	· 大根司本
2、所有资料真实有效	v,有据叫宜。 ubmitted in this application is authentic and derived from the reliable
source.	ionitted in this application is authentic and derived in the
3、申请资料的纸质版	页与电子版完全一致。
The electronic and pa	per version of application should be identical.
4、如有虚假,愿意承	《担相应的法律责任。
	ty for all the falsehood of the information submitted and will assume
all the lawful liability.	
	TO TO
法定代表人(或委托代理	人) 签名: 中月
Signature of the applicant	(or the agent authorized by the applicant)
(6)	(企业董章) (the seal of the enterprise)
	2018年11月 09日

 申请材料真实性的保证声明应由申请人(申办企业由法定代表人)签署生效。委托 代表人签署的,应出具由申请人签署的有效委托书。

The signature must be done by himself (or herself). In the case of signature made by the agent the written certificate of authorization must be provided.

2. 本表由江苏省食品药品监督管理局制定。 This format is established by Jiangsu Food and Drug Administration.