NATIONAL MUSEUM

In Prague on: 22.10.2019	Telephone: xxxxxxxxxxxxxxxxxxx
Contact person: xxxxxxxxxxxxxxxxxxx	E-mail: xxxxxxxxxxxxxxxxxxx
Unit department: 02100	Department: xxxxxxxxxxxxxxxxxxx

ORDER form no.: 02OZ190414

Order tittle: spare part - ion pump (partial invoice)

Provider address:	**CAMECA, SAS** **xxxxxxxxxxxxxxxxxxxxxxxxxxxxxx** **xxxxxxxxxxxxxxxxxxxxxxxxxxxxxx** **VAT ID: xxxxxxxxxxxxxxxxxxxxx**

Order description:
xxxxxxxxxxxxxxxxxxxx