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|  |  |  | Odběratel: | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  | **Ústav živočišné fyziologie a genetiky AV ČR, v.v.i. Rumburská 89 277 21 LIBĚCHOV Česká republika** | | | | | | | | | | | | PID: | | | | | | |  | | | | | |  |  |  |  |  |  |
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|  |  |  |  |  |  | Číslo účtu: | | | | | | |  | | | | | |  |  |  |  |  |  |
|  |  |  |  |  |  | Peněžní ústav: | | | | | | |  | | | | | |  |  |  |  |  |  |
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|  |  |  |  |  |  | DIČ: | | | **CZ67985904** | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  | IČ: | | **48586366** | | | | | | | DIČ: | | **CZ48586366** | | | |  |  |  |  |  |  |  |
|  |  |  |  |  |  | IČ: | | | **67985904** | | | |  |  |  |  |  |  |  |  |  |
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|  |  |  |  | Konečný příjemce: | | | | | | | | | | | | |  |  |  |  |  |  |  |  |
|  |  |  |  | |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  | |  | **NS811000 UŽFG AV ČR účtovací** | | | |  |  |  |  | | **Ing. Novák Jaromír** | | | | | **Tel.: +420315639597 E-mail: novak@iapg.cas.cz** | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |  | **Platnost objednávky do:** | | | | | | | | | **31.12.2020** | | | |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  | Termín dodání: | | | | | | | **28.04.2020** | | | |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  | Forma úhrady: | | | | | | | **Příkazem** | | | |  |  |  |  |  |  |
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|  |  |  |  |  |  | |  |  |  | | --- | --- | --- | | Místo dodání: | **Ústav živočišné fyziologie a genetiky AV ČR, v.v.i., Rumburská 89, 277 21 Liběchov** |  | |  |  | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |
|  |  |  |  |  |  | Termín úhrady: | | | | | | |  | | | |  |  |  |  |  |  |
|  |  |  |  |  |  | |  |  |  | | --- | --- | --- | | Způsob dopravy: |  |  | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  | |  |  |  | | --- | --- | --- | | Dodací podmínky: |  |  | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  | **Při fakturaci vždy uvádějte číslo objednávky.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |
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|  |  |  |  |  |  | Prosíme o laskavé potvrzení přijetí naší objednávky. Děkujeme. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |
|  |  |  |  |  |  | Položkový rozpis: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |
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|  |  |  |  |  |  | **Položka** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |
|  |  |  |  |  |  |  | | | | | | | | **Množství** | | | **MJ** | | | | | | **Cena/MJ vč. DPH** | | | | | | | **Celkem s DPH** | | | | | | | |  |  |  |  |  |  |
|  |  |  |  |  |  | Údržba sestav hmotnostních spektrometrů a kapalinových chromatografů LC-MS/MS AB SCIEX 5500 QTRAP s nanoLC Eksigent 400 a LC-MS/MS AB SCIEX 5600 TripleTOF s nanoLC Eksigent 400 dle servisní smlouvy REG-18-2019. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |
|  |  |  |  |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | | 1.00 | ks | 701 800.00 | 701 800.00 | Kč | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |
|  |  |  |  |  |  | Na fakturu prosíme uvést číslo projektu "CNE (CZ.02.01.01/0.0/16\_019/0000785). Mnohokrát děkuji! | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |
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|  |  |  |  |  |  |  | ***Předpokládaná cena celkem (včetně DPH):*** | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  | **Datum vystavení:** | | | | | | | | | | 21.04.2020 | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  | **Vystavil:** Schwarzová Jana Tel.: 315 639 526, Fax: 315 639 506, E-mail: schwarzova@iapg.cas.cz                                                                       ...................                                                                           Razítko, podpis | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  |  | **Interní údaje objednatele : 811000 \ 120 \ 7851 CNE OPVVV Skalníková \ 0400 Deník: 15 \ Objednávky - OP VVV CNE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |