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|  |  |  | |  |  | | --- | --- | | ***Objednávka č.: 0021321058/1000*** |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |
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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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|  |  |  |  | |  |  | Smlouva: | | | | |  | | | | | | |  |  |  |
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|  |  |  |  |  | Číslo účtu: | | | | |  | | | | | | |  |  |  |
|  |  |  |  |  | Peněžní ústav: | | | | |  | | | | | | |  |  |  |
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|  |  |  |  |  | Dodavatel: | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | DIČ: | | | **CZ67985904** | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | IČ: | | **26774321** | | | | | DIČ: | | **CZ26774321** | | | | |  |  |  |  |
|  |  |  |  |  | IČ: | | | **67985904** | | | |  |  |  |  |  |  |
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|  |  |  |  |  |  | |  |  |  | | --- | --- | --- | |  |  |  | |  | **RADIX CZ s.r.o. Čáslavská 231 284 01 KUTNÁ HORA Česká republika** |  | |  | |  | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  | Konečný příjemce: | | | | | | | | | |  |  |  |  |  |
|  |  |  | |  |  |  |  | | --- | --- | --- | --- | |  |  |  |  | |  | **1. Ústav živočišné fyziologie a genetiky AV ČR, v.v.i., Rumburská 89, 277 21 Liběchov** | | | |  |  |  |  | | **MUDr. Ryska Ondřej, Ph.D.** | | | | | **Tel.: , Fax:  E-mail: ondrejryska@centrum.cz** | | | | | | | | | | | | | |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  | **Platnost objednávky do:** | | | | | | | | **31.12.2021** | | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  | Termín dodání: | | | | | | | **15.12.2021** | | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  | Forma úhrady: | | | | | | | **Příkazem** | | | |  |  |  |
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|  |  |  |  |  | |  |  |  | | --- | --- | --- | | Místo dodání: | **1. 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.** | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | Položka | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
|  |  |  |  |  | Referenční číslo | | | | | Množství | | | MJ | | | | | | Cena/MJ vč. DPH | | | | | Celkem vč. DPH | | | | | | | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | TAE CST2006F - Kolorektální stenty, full covered, ? těla 20 mm, délka 6 cm | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  |  |  | TAE CST1806F - Kolorektální stenty, full covered, ? těla 18 mm, délka 6 cm | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  |  |  | **Datum vystavení:** | | | | | | 12.11.2021 | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  | **Vystavil:** Schwarzová Jana Tel.: 315 639 526, Fax: 315639506, E-mail: schwarzova@iapg.cas.cz                                                                       ...................                                                                           Razítko, podpis | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  |  |  | **Interní údaje objednatele : 811000 \ 120 \ 19449 AZV Ryska 2 \ 0400 Deník: 32 \ Neinvestice GAČR,AZV,IG,režieLAB** | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |