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|  |  |  | |  |  | | --- | --- | | ***Objednávka č.: 0023140323/1000*** |  | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |
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|  |  | Odběratel: | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  | **Ústav živočišné fyziologie a genetiky AV ČR, v.v.i. Rumburská 89 277 21 LIBĚCHOV Česká republika** | | | | | | | | | PID: | | | | **UZFG2023-4712** | | | | | | | | |  |  |  |
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|  |  |  |  |  | Číslo účtu: | | | | **19-8264720227/0100** | | | | | | | | |  |  |  |
|  |  |  |  |  | Peněžní ústav: | | | | **Komerční banka, a.s.** | | | | | | | | |  |  |  |
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|  |  |  |  |  | DIČ: | | **CZ67985904** | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | IČ: | **68378050** | | | | DIČ: | | | **CZ68378050** | | | | | |  |  |  |  |
|  |  |  |  |  | IČ: | | **67985904** | | |  |  |  |  |  |  |
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|  |  |  |  |  |  | |  |  |  | | --- | --- | --- | |  | **Ústav molekulární genetiky AV ČR, v. v. i. Vídeňská 1083 142 00 Praha 4 Česká republika** |  | |  | |  | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  | Konečný příjemce: | | | | | | | |  |  |  |  |  |
|  |  |  | |  |  |  |  | | --- | --- | --- | --- | |  | **Ústav živočišné fyziologie a genetiky AV ČR, v.v.i., Rumburská 89, 277 21 Liběchov** | | | |  |  |  |  | | **Ing. Köhlerová Iveta** | | | | | **E-mail: kohlerova@iapg.cas.cz** | | | | | | | | | | | |  |  |  |  |  |
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|  |  |  |  |  |  |  |  | **Platnost objednávky do:** | | | | | | | | **31.12.2023** | | | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  | Termín dodání: | | | | | | | **16.08.2023** | | | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  | Forma úhrady: | | | | | | | **Příkazem** | | | | |  |  |  |
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|  |  |  |  |  | |  |  |  | | --- | --- | --- | | Místo dodání: | **Ústav živočišné fyziologie a genetiky AV ČR, v.v.i., Rumburská 89, 277 21 Liběchov** |  | |  |  | | | | | | | | | | | | | | |  |  |  |
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|  |  |  |  |  | |  |  |  | | --- | --- | --- | | Způsob dopravy: |  |  | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | |  |  |  | | --- | --- | --- | | Dodací podmínky: |  |  | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  | **Při fakturaci vždy uvádějte číslo objednávky.** | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  | |  |  | | --- | --- | | přefakturování nákladů za přípravu projektové žádosti OP JAK | 71 742,13 Kč | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  |  |  | **Datum vystavení:** | | | | | 15.08.2023 | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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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 \ 00017 režie správní \ 0800 Deník: 14 \ NEINVESTICE - REŽIE** | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |
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