

NATIONAL MUSEUM

In Prague on: 15.03.2024			Telephone:	*****	XXXXX	
Contact person: xxxxxxxxxxxxxxxxx		E-mail:	*****	XXXXX		
Unit department: 01270		Department:	xxxxxxxxxxx	XXXXX		
ORDER fo	orm no.:010Z2	40103				
Order tittle: Trans	sport p edm t pro výsta	avu Baroko v I	Bavorsku a v	echách (p j itelé	: Salzburg Museum	Gmb
Provider address:	MuseumsPartner Kunstspedition GmbH xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx					
Order description	:: <xxxxxxxxxxxxxxxxxxxxxxxxx< th=""><th>****</th><th>*****</th><th></th><th></th><th></th></xxxxxxxxxxxxxxxxxxxxxxxxx<>	****	*****			
Additional informa	tion: xxxxxxxxxxxxxxxxxxxxxx	****	****			
	Václavské nám stí 68, 110 xxxxxxxxxxxxxxxxxxx		: 00023272, D	DI : CZ00023272		
Price without VAT	4 460,00 EUR	VAT:	0,00 EUR EU	R Total:	4 460,00	EUR
In Prague on: 22		Signature: xxxxxxxxxxxxxxxxx				
Acceptance:						
obliged to disclose	etter c) Act no. 340/2015 contracts and orders in th s order and confirms by th	e Register of C	ontracts. The o	ther party acknowl	edges this fact, consen	

The order form will be published on the national register of contracts by the National musem.

Date: 22.03.2024

Provider (signature): xxxxxxxxxxxxxxxxx

Please, include our order number on the invoice. Without this information, we send documents back as incomplete. Attach a copy of this order to your invoice.