

## NATIONAL MUSEUM

In Prague on: 18.05.2024		Telephone:	xxxxxxxxxxxxxxx		
Contact person: xxxxxxxxxxxxxxxxxx		E-mail:	*****		
Unit department: 01270		Department:	*****		
ORDER fo	orm no.:010Z2	40838			
Order tittle: Trans	sportpedmt zptpj	itel m v rám	ci výstavy Baro	oko v Bavorsku a v ech:	ách
MuseumsPartner Kunstspedition GmbH					
Provider address:	-				
	***************************************				
	VAT ID: xxxxxxxxxxxxxxxx				
Order description				~~~~~	
	******	~~~~~	~~~~~		
Additional information	ition:				
*****	*****	*****	*****	xxxxxxxxxxxx	
Národní muzeum,	Václavské nám stí 68, 11	0 00 Praha 1, I	: 00023272, D	I : CZ00023272	
Account number: x	*****				
Price without VAT	5 295,51 EUR	VAT:	0,00 EUR EU	R <b>Total:</b>	5 295,51 EUR
In Prague on: 29.05.2024 Signature: xxxxxxxxxxxxxxxxx					XX
Acceptance:					
Under § 2 para. 1 l	etter c) Act no. 340/2015	Coll. on the Re	gister of Contra	cts, the Nationl Museum is	s a legal person
obliged to disclose	contracts and orders in th	e Register of C	Contracts. The ot	her party acknowledges th	is fact, consents
-		-		with the content of this order	
		0	č		

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

Date: 29.05.2024

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.