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|  |  | Odběratel: | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  | **Ústav živočišné fyziologie a genetiky AV ČR, v.v.i. Rumburská 89 277 21 LIBĚCHOV Česká republika** | | | | | | | | | | | | PID: | | | | | **UZFG2024-2536** | | | | | | | |  |  |  |
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|  |  |  |  |  | Číslo účtu: | | | | | **19-8264720227/0100** | | | | | | | |  |  |  |
|  |  |  |  |  | Peněžní ústav: | | | | | **Komerční banka, a.s.** | | | | | | | |  |  |  |
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|  |  |  |  |  | DIČ: | | | **CZ67985904** | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | IČ: | | **07604670** | | | | | DIČ: | |  | | | | | |  |  |  |  |
|  |  |  |  |  | IČ: | | | **67985904** | | | |  |  |  |  |  |  |
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|  |  |  |  |  |  | |  |  |  | | --- | --- | --- | |  | **David Komeda Na Ráji 1340/8 276 01 MĚLNÍK Česká republika** |  | |  | |  | | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  | Konečný příjemce: | | | | | | | | | |  |  |  |  |  |
|  |  |  | |  |  |  |  | | --- | --- | --- | --- | |  |  | | | |  |  |  |  | | **Křováková Edita** | | | | | **Tel.: 315 639 523, Fax:  E-mail: krovakova@iapg.cas.cz** | | | | | | | | | | | | | |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  | **Platnost objednávky do:** | | | | | | | | **31.12.2024** | | | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  | Termín dodání: | | | | | | | **06.12.2024** | | | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  | Forma úhrady: | | | | | | | **Příkazem** | | | | |  |  |  |
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|  |  |  |  |  | Termín úhrady: | | | | | | |  | | | | |  |  |  |
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|  |  |  |  | **Při fakturaci vždy uvádějte číslo objednávky.** | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  | Referenční číslo | | | | | Množství | | | MJ | | | | | | Cena/MJ vč. DPH | | | | | Celkem vč. DPH | | | | | | | | | |  |  |  |
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|  |  |  |  |  | **Datum vystavení:** | | | | | | 10.06.2024 | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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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 \ 00808 režie provoz \ 0800 Deník: 14 \ NEINVESTICE - REŽIE** | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |
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