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|  | |  | | --- | | **Objednávka** | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  | |  | | --- | | **2243602** | | | | | | | | | | | |  |
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|  |  |  | |  | | --- | | **Odběratel** | | | | | | | |  |  |  |  |  |  |  |  |  | |  | | --- | | **Dodavatel** | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  | |  | | --- | | **Nemocnice Třinec, příspěvková organizace** | | **Kaštanová 268, Dolní Líštná** | | **Třinec 739 61** | |  | |  | | | | | | | | | | | | | | | |  | |  | | --- | | **VKUS-BUSTAN s.r.o.** | |  | |  | |  | |  | | | | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  | |  | | --- | | **Příjemce** | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  | |  | | --- | | **Předmět** | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  | |  |  |  |  | | --- | --- | --- | --- | |  | **Kód položky** | **Název zboží** | **Množství** | |  | 210349 | MASAZNI gel chladivý Lotio Aktiv AF bez alkoholu | 90,00 | |  | 206901 | UBROUSKY čistící vlhké SAFELINE 200x170mm | 240,00 | |  | 207415 | MISKA emitní jednorázová malá BF007 papírová | 2 400,00 | |  | 211498 | RUKAVICE nitrilové, vel. M modré | 40 000,00 | |  | 206632 | PENA čistící Lotio Derm SunSept 400 ml | 200,00 | |  | 206609 | BRYNDAK jednorázový bílý PE | 20159529 | 80,00 | |  | 203961 | PAPIR na operační stůl 50cmx50m 2vrstvý | 81,00 | |  | 204016 | KARTACEK chirurgický suchý,jednorázový sterilní | 1 680,00 | |  | 211497 | RUKAVICE nitrilové, vel. S modré | 40 000,00 | |  | 211499 | RUKAVICE nitrilové, vel. L modré | 30 000,00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |
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|  |  |  |  | |  | | --- | | Dodavatel svým podpisem potvrzuje objednávku a souhlasí s obchodními podmínkami. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  | |  | | --- | | Příkazce operace: | | | | | | | | | | | | | | | |  | |  | | --- | | Správce rozpočtu: | | | | | | | | | | | | | | | | | | | | |  |  |
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