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|  | |  | | --- | | **Objednávka** | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  | |  | | --- | | **L255821** | | | | | | | | | | | |  |
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|  |  |  | |  | | --- | | **Odběratel** | | | | | | | |  |  |  |  |  |  |  |  |  | |  | | --- | | **Dodavatel** | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  | |  | | --- | | **Nemocnice Třinec, příspěvková organizace** | | **Kaštanová 268, Dolní Líštná** | | **Třinec 739 61** | |  | |  | | | | | | | | | | | | | | | |  | |  | | --- | | **Fresenius Kabi s.r.o.** | |  | |  | |  | |  | | | | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  | |  | | --- | | **Příjemce** | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  | |  | | --- | | **Předmět** | | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  | |  |  |  |  | | --- | --- | --- | --- | |  | **Kód položky** | **Název zboží** | **Množství** | |  | 51667 | ONDANSETRON KABI | 30,00 | |  | 114911 | SMOFKABIVEN EXTRA NITROGEN | 2,00 | |  | 114920 | SMOFKABIVEN EXTRA NITROGEN | 1,00 | |  | 107036 | FRESUBIN 2 KCAL HP FIBRE | 3,00 | |  | 118534 | NEODOLPASSE | 2,00 | |  | 143228 | AMIKACIN FRESENIUS KABI | 1,00 | |  | 116181 | SODIUM CHLORIDE FRESENIUS KABI 0,9% | 20,00 | |  | 116178 | SODIUM CHLORIDE FRESENIUS KABI 0,9% | 20,00 | |  | 184148 | SODIUM CHLORIDE FRESENIUS KABI 0,9% | 15,00 | |  | 187780 | FLUCLOXACILLIN FRESENIUS KABI | 10,00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |
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|  |  |  |  | |  | | --- | | Dodavatel svým podpisem potvrzuje objednávku a souhlasí s obchodními podmínkami. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |
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|  |  |  |  | |  | | --- | | **Poznámka** | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  |  | |  | | --- | | Příkazce operace: | | | | | | | | | | | | | | | |  | |  | | --- | | Správce rozpočtu: | | | | | | | | | | | | | | | | | | | | |  |  |
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