

**B.- PLATEBNÍ PODMÍNKY:**

Payment method: invoice

Payment on 60 days

**C.- KVALITATIVNÍ ZÁVAZKY: N/A**

**C.- POZNÁMKY:**

Datum: Jméno:	Datum: Jméno:	
Podpisy Datum:  Jméno: Odpovědnost: EMPLOYEE NOT FOUND	Podpisy:  Datum: Jméno: Odpovědnost:	
FAKTURU ZAŠLETE NA FINANČNÍ ODDĚLENÍ KUPUJÍCÍHO:		
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