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|  |  |  |  | **FYZIKÁLNÍ ÚSTAV AV ČR, v.v.i. Na Slovance 2 182 21 PRAHA 8 Česká republika** | | | | | | | | | | | | | | | PID: | | | | | | | |  | | | | |  |  |  |
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|  |  |  |  |  |  |  |  |  |  |  | **Platnost objednávky do:** | | | | | | | | | | **31.12.2018** | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  | Termín dodání: | | | | | | | **03.04.2018** | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  | Forma úhrady: | | | | | | | **Příkazem** | | |  |  |  |
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|  |  |  | Termín úhrady: | | | | | | |  | | |  |  |  |
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|  |  |  | **!!!!! Při fakturaci vždy uvádějte číslo objednávky !!!! Žádáme Vás o potvrzení objednávky.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |
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|  |  |  | Na fakturu prosím uveďte prosím projekt SAFMAT CZ.02.1.01/0.0/0./0/16\_013/0001406 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |
|  |  |  | Položkový rozpis: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |
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|  |  |  |  |  |  |  |  |  |  |  |  | **Množství** | | | | | **MJ** | | | | | **Cena/MJ vč. DPH** | | | | | | | | | | **Celkem s DPH** | | | | | | |  |  |  |
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|  |  |  |  | ***Předpokládaná cena celkem (včetně DPH):*** | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  | |  |  |  | | --- | --- | --- | | **80 223.00** | **Kč** |  | | | | | | | | |  |  |  |
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|  |  | **Datum vystavení:** | | | | | | | | | | |  | 21.03.2018 | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |  | **Vystavil:** | | | | | | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | Žádáme Vás o zasílání daňových dokladů v elektronické podobě (skeny) na adresu efaktury@fzu.cz. O doručení dokladů obdržíte potvrzující e-mail. Objednávku nad 50 000 Kč uveřejníme v souladu se zákonem č. 340/2015 Sb., o zvláštních podmínkách účinnosti některých smluv, uveřejňování těchto smluv a o registru smluv, v platném znění. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |