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| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Potvrzení objednávky číslo | | | | | | | | | | | | | | 53 | | | | | | | | | Císlo dokladu: | |  | | | | | | |  | | | | | Datum potvrzení; | | | | 14.11.2018 | | | | | Referent: | |  | | | | | | | Navržený termín plnění: | | | |  | | | | | Dodavatel: | | | | | | | |  | | | | | Odběratel: | | | | | | | | | Zdravotní 'isl"i' se sídlem p stínad Labem  Sídlo: Woskevská 1531/15, 400 OI Ústínad Labem  IČ 71009361 CZ71009361  Místo plnění: Ústí nad Labem | | | | | | | | Uřadpríĺc€ Ceské republiky  Krajská pobočka P Ústí nad Labem  Dpořátova 1609/18  400 Ústí nad Labem | | | | | | | | | Platební údaje: | | | | | | |  | | | | | Obchodní údaje: | | | | | | | | | Zůsob úhrady. | | | | Bankovním převodem na základě daňového dokladu | | | Způsob dodáni: | | | | |  | | | | Splatnost: | | | | dnů od DUZP | | | Smluvnípokuta za pozdní dodání: | | | | |  | | | | Urokz prodlení: | | | | f 2 naň Vl, 351/2013 Sb. | | | Ostatní: | | | | |  | | | | Cena: | | | | | bez | (Kč) | | sazba DPH | | |  | |  | | | | | s DPH(Kč) | | | |  |  | |  | | | 0% | | 0,00 | | | | | 180600,00 | | |   Akceptujeme objednávku v souladu s ustanovením S 1740 zákona č 39/2012 Sb. s doplněním podstathö neměnícím podmínky objednávky.  Bereme na vědomí a souhlasíme s uveřejněním smlouvy (s hodnotou nad 50 tis KČ) v registru smluv zňzeném podle zák. č. 340/2015 Sb.     |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  | |  |  |  | | | Vystgvil: | Íčková Jana | Podpis: | \*) |  |  |   Podbarvená pole kpovinnému vyplnění  Stránka 1 zl |