

ORDER**No.:**

SELLER

BUYER

Date of order: _____

Date of issue: _____

Shipping address: _____

Data of Invoice: _____

Contact person: _____

Phone: _____ E-mail adress: _____

Catalog No.	Name of product / service	I.u. Symbol	Amount	Net unit price	Net value
1					
2					
3					
4					
				TOTAL	
				VAT 23%	
				TOTAL GROSS	

TERMS AND CONDITIONS OF DELIVERY: _____

TERMS OF PAYMENT: _____

COMMENTS:

Date, stamp, signature of the person
authorized to place orders