



EFFEZETA®
SYSTEM
MODULO D'ORDINE

DATA _____

CLIENTE _____ INDIRIZZO _____

LOCALITÀ _____ CAP _____ TEL _____ FAX _____

P.IVA

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 RESP.ACQUISTI _____

BANCA D'APPOGGIO _____ IBAN _____

| N° PEZZI | L | H | COLORE | MODELLO | RIFERIMENTI | MISURE |
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|-----------------------|---|-------------------------------|
| CONSEGNA | PAGAMENTO | FIRMA PER ACCETTAZIONE |
| IL COMMITTENTE | SALVO APPROVAZIONE EFFEZETA SYSTEM | |

NOTE _____