

**From:** Return DI  
 RETURN ONLY, NOT FOR SALES Postlink  
 Am Eifeltor 501 .  
 50997 köln  
 Germany

**Kontakt Absender:**  
 RETURN ONLY, NOT  
 FOR SALES Postlink  
 Tel.: .

**To:**  
 Soa Novackova (DENTAComfort s.r.o)  
 Havlíkova 789  
 767 01 Kromíž  
 Czech Republic

**Kontakt Empfänger:**  
 Soa Novackova  
 (DENTAComfort s.r.o)  
 Tel.: 606229200

Abrechnungsnr.: 63398262125315  
 Referenznr.: 309262034126  
 Sendungsnr.: CM529985044DE

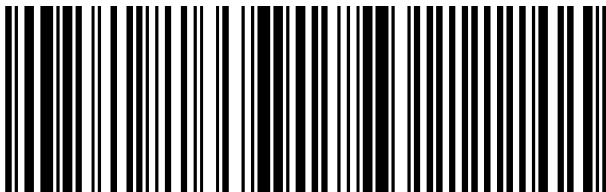
Gewicht:

Anzahl

**1.000 kg**

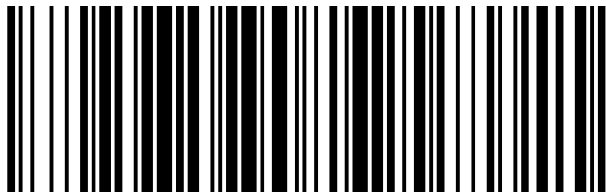
**1 / 1**

Leitcode/Routingcode



(403)20376701+67000000

Identcode/License Plate



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