***Please include the following data in you invoice:***

***NextGenerationEU – M4C2 I 1.1.***

**Codice Progetto: 2022XXE54**

**CUP F53D23006500006**

**CIG: B73576EFEC**

**Importo finanziato: € 12.505,00**

Università degli Studi di Ferrara

**Dipartimento di Medicina Traslazionale e per la Romagna**
Via Luigi Borsari, 46 44121 FERRARA ITALIA
C.F. 80007370382 VAT NUMBER: IT00434690384

# Order n° 261 date 19/06/2025

**IMPORTANT- If you intend to issue an Invoice in Electronic format, please enter the following references:**

| | |
|---|---|
| **Buyer Elettronic address** | 910HJ8 |
| **Purchase Order Reference** | DG1273727 |

# Università degli Studi di Ferrara

**Dipartimento di Medicina Traslazionale e per la Romagna**
Via Luigi Borsari, 46 44121 FERRARA ITALIA
C.F. 80007370382 VAT NUMBER: IT00434690384

TO Emka TECHNOLOGIES S.A.S

Bd du Général Martial Valin,59

75015 Parigi (EE) FRANCIA

C.F. VAT NUMBER: FR88509163663

## Order n° 261 date 19/06/2025

Please remember to make reference to the order number on description when sending invoices, and for goods delivered, also indicate the number of the delivery document.

| DESCRIPTION |
|---|
| G06420 - Fornitura di ricambi per strumentazione EcgTunnel e licenza annuale software - RS Prof. Matteo MARTI Progetto PRIN 2022 Missione 4, Componente 2, Investimento 1.1 finanziato dallUnione Europea NextGenerationEU - codice 20222XXE54 - CUP F53D23006500006 |

| EXTERNAL REFERENCE |
|---|
| Rif. You quotations S0153586 and n. 30291 |

| PAYMENT METHOD | BANK | AGENCY | IBAN |
|---|---|---|---|
| Bonifico Europeo | Non assegnato | Non assegnato | FR7630056007490749021614460 |

| | DESCRIPTION | QTY | UNIT PRICE | TOTAL PRICE | DISCOUNT | SURCHARGE € | NET PRICE W/O VAT | NOT SUBJECT TO VAT | NOT SUBJECT TO VAT EX ART 72 |
|---|---|---|---|---|---|---|---|---|---|
| 1 | EC-DPTA Differential air pressure sensor (amplified version providing higher resolution), to monitor ecgTUNNEL plethysmograph (cable length 40cm) | 4 | 480,0000 | 1.920,00 | 0,00 | 0,00 | 1.920,00 | 0,00 | 0,00 |
| 2 | EC-MS-R40 ecgTUNNEL Mouse Restraint, 40-60g | 4 | 280,0000 | 1.120,00 | 0,00 | 0,00 | 1.120,00 | 0,00 | 0,00 |
| 3 | VF-B-TB vivoFlow® Whole Body Plethysmograph Tubing Kit | 2 | 200,0000 | 400,00 | 0,00 | 0,00 | 400,00 | 0,00 | 0,00 |
| 4 | XS-DRY-S Drying Tube | 8 | 20,0000 | 160,00 | 0,00 | 0,00 | 160,00 | 0,00 | 0,00 |
| 5 | SHP-DIR Shipping - Direct | 1 | 200,0000 | 200,00 | 0,00 | 0,00 | 200,00 | 0,00 | 0,00 |
| 6 | EC-PC-M-RD4 Premium Care Service - Covers 4 ecgTUNNEL with Dome (Mice) - 1 Year with enrollment fees included - INSTALL/TRAIN Installation and training on updates - remote session (1h) | 1 | 6.450,0000 | 6.450,00 | 0,00 | 0,00 | 6.450,00 | 0,00 | 0,00 |

| | |
|---|---|
| *TOTAL PRICE €* | 10.250,00 |
| *TOTAL DISCOUNT €* | 0,00 |
| *TOTAL SURCHARGE €* | 0,00 |
| *FISCAL TOTAL ORDER €* | 10.250,00 |

| Line n° | CUP |
|---|---|
| 1,2,3,4,5,6 | F53D23006500006 |

| Line n° | CIG |
|---|---|
| 1,2,3,4,5,6 | B73576EFEC |

| Line n° | PROJECT |
|---|---|
| 1,2,3,4,5,6 | 2023-PRIN-MM_002 |

| | |
|---|---|
| **PURCHASE CAUSAL** | Fuori convenzione |
| **DELIVERY MODE AND ADDRESS** | Dipartimento di Medicina Traslazionale e per la Romagna - Fossato di Mortara 70, 44121 Ferrara – Edificio CUBO, Laboratorio Tossicologia Forense - Rif. Sabrine Bilel tel.3454373849 |

Unless specified otherwise in the above order form, it is implied that the supply is subject to the current laws and regulations regarding supplies on behalf of the state.As forenseen by art. 3 of italian Law n. 136/2010, regarding the traceability of financial flows, the supplier must indicate his/her dedicated bank account details, and if indicated in the order, also the CIG and CUP codes.Confidentiality and data protection. According to the EU Regulation n. 2016/679 of 27.04.2016 on the protection of individuals with regard to the processing of personal data, the supplier is hereby informed that the data provided will be used exclusively in relation to the supply and the management of the contract.

Notes:

The Manager

**ORDER CONFIRMATION (Ref. our Order N°261 date 19/06/2025)**

Before fulfilling this order, we would like to inform you that you are required to return this order form, duly signed for the acceptance of the following clause, regarding the traceability of financial flows:

***"The Company to whom this order is addressed agrees to fulfil all the legal requirements regarding the traceability of financial flows as set out in Art. 3 of Law n°136 of 13/08/2010 (and subsequent integrations to the latter). The Company is required to immediately inform the contracting party and the Prefecture – local government office, in case its counterpart fails to fulfil the financial flow obligations".***

**As foreseen by Art. 3, comma 9 bis, the failure to adopt bank or postal transfers as payment methods, or other accepted means of payment which permit the full traceability of the financial operations, will determine the resolution of the contract.**

**N.B.: For the purposes of the DURC, please confirm the number of employees currently working for the company in the section: n° employees: ……**

Place and date:_____

for acceptance: the Company

_____

(seal and signature)

**N.B.: The following section must be completed only if the Company has not already provided the requested data and/or has to communicate any changes to it. Also in this case, please sign at the bottom of the page to agree to immediately inform the contracting party of any changes.**

According to art. 3, comma 7, of Law n. °136/2010 and subsequent integrations, the undersigned (general details and fiscal code)…….in his/her role as …….. …… of the Company Emka TECHNOLOGIES S.A.S registered office Bd du Général Martial Valin,59 75015 Parigi (EE), FRANCIA CF Fiscal code VAT REG. N° 88509163663 declares that the following bank/postal account details are dedicated to the financial flows foreseen in public procurement contracts:

IBAN (International Bank Account Number)……
Bank/Post Office Branch ……
The following subjects are authorised to carry out operations on the account:
(indicate the subjects' name, surname, place and date of birth and fiscal code)……
……
The undersigned agrees to immediately inform the contracting party of any changes to the data provided in this document.

Place and date:_____

_____

(seal and signature)

**The data received will be used, also with computerized means, exclusively for the purposes for which it was provided (EU Regulation 2016/679 of 27.04.2016).**