|  |  |  |
| --- | --- | --- |
| **CONFIRMACIÓN**  **{{PEDIDO}}**    **CLIENTE /** *CUSTOMER*  {{CLIENTE}}    **AGENTE**  {{AGENTE}} | **FECHA /** *DATE*  **{{FECHA}}**  **NIF /** *VAT NUMBER*  {{NIF}} | **{{RSOC}}**  {{EMPRESA}}  {{DIR}}  {{CP}} {{POB}}  {{PRO}}  Tel. {{TEL}}  E-Mail. {{MAIL}}  Proveedor: {{PROVEEDOR}} |