



Secretaría  
de Salud

# RECIBO DE NÓMINA

RFC Empleador: SES870401TX8  
**SERVICIOS ESTATALES DE SALUD**  
AV. RUFFO FIGUEROA No. 6  
COL. BUROCRATAS, C.P. 39090  
CHILPANCINGO DE LOS BRAVO. GUERRERO  
NOMINA: FOR3-11-22-2018

RFC Empleado: BADM840331UV0  
**BALTAR DIAZ MARTHA FABIOLA**  
U004U004105 M0203622398  
AUXILIAR DE ENFERMERIA A  
1214790980 CSRC QUECHULTENANGO MPIO QUECHULTENANGO GRO  
HRS: 8 CURP: BADM840331MGRLZR09

## DESGLOSE DE PERCEPCIONES Y DESCUENTOS DE LA QUINCENA 22 DEL 2018

Percepciones			Descuentos		
Clave	Concepto	Importe	Clave	Concepto	Importe
07	SUELDOS BASE	\$4,281.00	01	IMPUESTO SOBRE LA RENTA	\$1,428.10
30	COMPENSACIONES ADICIONALES POR SERV ESPECIALES MEDIANO RIESGO	\$428.10	02	SEGURO DE RETIRO ISSSTE	\$288.43
42	ASIGNACION BRUTA	\$2,182.50	58	CUOTAS SINDICALES	\$85.62
55	AYUDA PARA GASTOS DE ACTUALIZACION	\$1,854.50	70	FONDO DE AHORRO PARA AUXILIO DE DEFUNCION	\$5.00
46	AYUDA PARA SERVICIOS PASAJES	\$282.50	77	SEGURO COLECTIVO DE RETIRO	\$5.35
38	AYUDA DE DESPENSA	\$392.50	04	SEGURO DE SALUD DE LOS TRABAJADORES EN ACTIVO Y FAMILIARES DERECHOHABIENTES	\$129.50
44	PREVISION SOCIAL MULTIPLE	\$292.50	04	SEGURO DE SALUD DE LOS PENSIONISTAS Y FAMILIARES DERECHOHABIENTES	\$29.43
			02	SEGURO DE INVALIDEZ Y VIDA ISSSTE	\$29.43
			02	SERVICIOS SOCIALES Y CULTURALES ISSSTE	\$23.55
			34	SEGURO DE RESPONSABILIDAD PROFESIONAL PARA PERSONAL MEDICOS Y DE ENFERMERIA	\$16.12
Total Percepciones:					\$9,713.60
Total Descuentos:					\$2,040.53
Neto a pagar					\$7,673.07

Se puso a mi disposición el archivo XML correspondiente y recibí de la Institución la cantidad neta a que este documento se refiere estando conforme con las percepciones y deducciones que en él aparecen especificados.

Firma del Empleado

### DATOS EXCLUSIVOS DEL SAT

Folio Fiscal UUID:	EC2F1D63-65E1-46CC-A510-2AB57021DA95	Registro Patronal:	58407427022
Certificado SAT:	00001000000403442064	Riesgo de puesto:	3 - Clase III
Certificado del emisor::	00001000000406440624	Tipo de régimen:	02 - Sueldos
Fecha y hora de certificación:	2018-11-29T18:23:04	Tipo de contrato:	01 - Por tiempo indeterminado
Régimen fiscal:	Personas Morales con Fines no Lucrativos	Tipo de jornada:	01 - Diurna
Expedición:	Chilpancingo de los Bravo. Guerrero 39090	Fecha de pago:	2018-11-30
Tipo de comprobante:	Pago de nómina	Fecha inicial de pago:	2018-11-16
Folio/Serie:	990/FOR3-11-22-2018	Fecha final de pago:	2018-11-30
Fecha y hora de emisión:	2018-11-29T17:53:19	Periodo de pago:	04 - Quincenal
Forma de pago:	En una sola exhibición	Número de días pagados:	15 - Días
Tipo de Nómina:	O - Nómina Ordinaria	Inicio de la relación laboral:	
Numero de Empleado:	1200027630	Numero de Seguridad Social:	80188475923

Datos obligatorios por disposiciones fiscales.

### Cadena Original del Complemento de Certificación Digital del SAT

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