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|  | ***NOTA: CANCELACIÓN DE FACTURAS Y/O CUENTAS DE COBRO PARA SER CANCELADAS POR CAJA MENOR Y/O FONDO RENOVABLE, DE LAS CUALES SE OBTUVO CRÉDITO NO SUPERIOR A 30 (TREINTA) DÍAS.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |
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|  | **RESOLUCION** | | | | |  | |  |  |  |  |  |  |  | **FECHA** | | | | |  | **DIA MES AÑO** | | | | | | | | | | |  |  |
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|  | **FORMA DE PAGO :** | | | | | | Fondo Renovable | | | |  |  |  |  |  |  |  |  |  |  |  |
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|  | *Estoy haciendo entrega de las facturas en original y con sus respectivas copias para ser canceladas mediante Caja Menor y/o Fondo Renovable de la FACULTAD DE CIENCIAS NATURALES Y EXACTAS con cargo a la cuenta autorizada. Igualmente encontrará los demás soportes requeridos para su pago.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
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|  | *A los siguientes proveedores, a quienes se les advirtió de las deducciones de Ley correspondientes a Retención en la Fuente, Reteiva sobre cualquier cuantía (50%), Reteica, Estampilla Pro-univalle, Prodesarrollo, Pro-hospital, Pro-cultura.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |
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|  | **SOLICITADO POR RECIBIDO COORDINACION ADMIN.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |
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|  | **MUÑOZ ARTUNDUAGA KATHERINE** | | | | | | | | | | |  |  |
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|  | *AUTORIZACIÓN PARA ELABORACIÓN DEL CHEQUE* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  |
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|  |  |  | ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ : Favor programar la elaboración de cheque a este Proveedor*** | | | | | | | | | | | | | | | | | | | | | | | | |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  | ***Coordinador(a) de Área Administrativa*** | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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