**FAMILIAS FUERTES, COMUNIDADES CON TODO**

**LISTA DE ASISTENCIA DE REUNIONES CON AUTORIDADES**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Sede: |  |  |  | Fecha: |  |  |  |
|  | Municipio | Comunidad |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| NO. | NOMBRE COMPLETO | TELÉFONO | CORREO ELECTRÓNICO |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Nombre y firma

Nombre y firma

Responsable comunitario:

Responsable institucional: