



CLINICA DE LA VISION
DEL VALLE S.A.S.

FORMATO LISTA DE ASISTENCIA








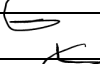
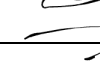

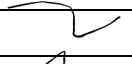



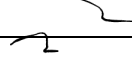
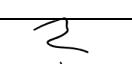




Código: F-GH-010

Actualización: 26/08/2024

Versión: 003

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Fecha:	2025-10-16		
Tema:	hjbbhjb		
Responsable:	Kevin Rivas		
Cargo:	Auxiliar sistemas		
Modalidad:	Presencial	Sede:	5
Hora de inicio:	11:43	Hora de Finalización:	11:43

No.	Nombre Completo	Cargo	Firma
1	dfg	dfg	
2	dfg	dfg	
3	dfg	dfgd	
4	dfgdf	dfgdf	
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6	dfgdfg	dfgdfg	
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9	fgdg	dfgdfg	
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