19405

H. CARE ADMIN.RED SALUD S.A.C.

COMPROBANTE

PAG. 3

SUB-DIARIO : 22

BANCOS - EGRESOS VARIOS

COMPROBANTE : 100091

FECHA: 29/10/2018

MONEDA : MN
CONVERSION : S
TIPO CONVERSION : V
T.CAMBIO :

: MN : S : V

CONCEPTO : PAGO INKAFARMA

CUENTA	ANEXO	CC. TP.	D E B E	JERA *** HABER	D E B E	IONAL *** H A B E R DOCUMENTO	FECHA	VENC.
421201 421201 421201 421201 421201 421201 421201 421201 421201 421201 421201 421201	20331066703 20331066703 20331066703 20331066703 20331066703 20331066703 20331066703 20331066703 20331066703 20331066703	. 003	2.49 0.76 2.98 134.20 4.15 85.90 0.81 80.73 0.42 1.79	314.23	8.35 2.55 9.97 449.16 13.90 207.52 2.70 270.20 1.40 6.00	FT F467-0003637 FT F020-0021395 FT FC13-0000335 FT F696-0033103 FT F695-0003157 FT F696-0033121 FT F464-0060280 FT F236-0018591 FT F003-0009290 FT PD59-0000243	17/08/18 21/08/18 22/08/18 24/08/18 27/08/18 28/08/18 30/08/18 11/09/18 13/09/18 29/10/18	01/10, 01/10, 01/10, 01/10, 01/10, 01/10, 01/10, 01/10,

TOTAL 314.23 314.23 1,051.75 1,051.75

Hecho por SIST

Revisado Cont.

Aprobado

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