{#items}

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  | | --- | --- | --- | --- | | RECIBO NO. | {numeroPago}/{cantidadPagos} | FECHA : | **{fechaLimite}** | | RECIBIMOS DE: | **{nombreCompleto}** | | | | DIRECCION: | {calle} NO.{no}. {colonia} {municipio} {estado} | | |   LA CANTIDAD DE: $**{cargo}**   |  |  | | --- | --- | | Saldo anterior: | ${saldoAnterior} | | Saldo actual: | ${saldoActual} | | Saldo Liquidación: | ${saldoActual} | | Próximo pago: | {proximoPago} |   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  nombre y firma del agente de cobranza |
| |  |  |  |  | | --- | --- | --- | --- | | Teléfono Particular: | {telefono} | Crédito Folio: | {folioCredito} | | Teléfono celular: | {celular} | Numero cliente: | {numeroCliente} | | Teléfono Oficina: | {telefonoOficina} |  |  | |

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{/items}