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| **COORDINACIÓN GENERAL ADMINISTRATIVA Y FINANCIERA** |  |
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| **FORMATO DE ENTREGA-RECEPCIÓN DE BIENES, MATERIALES O SERVICIOS** |  |
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| **PROVEEDOR** | **FACTURA FOLIO FISCAL** | **FECHA FOLIO FISCAL** |  |
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| **DEPENDENCIA QUE RECIBE** | **FOABUC** | **CRI** | **CONTRATO** |  |
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| **CANTIDAD** | **\*\* DESCRIPCIÓN DEL BIEN, MATERIAL O SERVICIO** | **MARCA** | **MODELO** | **No. DE SERIE** |  |
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| SE HACE CONSTAR QUE LOS BIENES, MATERIALES O SERVICIOS FUERON RECIBIDOS A ENTERA SATISFACCIÓN |  |
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| **ENTREGA PROVEEDOR** |  | **RECIBE PLANTEL O DEPENDENCIA** |  |
|  |  |  |  |  |  |  |
| NOMBRE Y FIRMA |  | NOMBRE, FIRMA, SELLO Y FECHA DE RECEPCIÓN |  |
|  |  |  | Director o Responsable de las funciones contablesFecha de Recepción: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |