

FECHA:

01.DIC.2021

PUESTO DEL SOLICITANTE:

Chofer

DENOMINACIÓN DEL CARGO:

ADMINISTRATIVO

OPERATIVO

DIRECTIVO

AREA DE ADSCRIPCIÓN:

Oficialia Mayor

NOMBRE DEL SOLICITANTE:

C. Ángel Jaimos González

DENOMINACIÓN DEL ACTO DE REPRESENTACIÓN:

Comisión

NÚMERO DE PERSONAS ACOMPAÑANTES:

ESTADO Y CIUDAD DE ORIGEN:

San Luis de la Paz, Lto

ESTADO Y CIUDAD DE DESTINO:

León Lto

MOTIVO DEL CARGO O COMISIÓN:

Traslado de pacientes

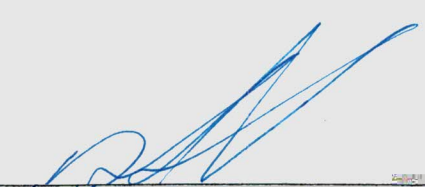
SALIDA:

REGRESO:

IMPORTE TOTAL EJERCIDO EROGADO:

IMPORTE TOTAL DE GASTOS NO EROGADOS:

Ángel Jaimos G.
FIRMA DEL SOLICITANTE


FIRMA DEL TITULAR DE LA DEPENDENCIA



SAN LUIS DE LA PAZ

SOMOS TODOS

AYUNTAMIENTO 2021-2024

COMISIÓN

Folio: _____

(CONTRALORÍA MUNICIPAL SAN LUIS DE LA PAZ GTO.)

Con fundamento, y para dar cumplimiento a lo dispuesto en el artículo 117 fracciones II, V, XV y XVII de la ley orgánica municipal para el estado de Guanajuato y sus municipios

Referencia _____

Fecha: 29 de noviembre de 2021

C. Ángel Jaimes González

Apellido Paterno Apellido Materno Nombre (s) Puesto: Chofer

Dirección o Dependencia: Oficialía Mayor



Atender comisión en la ciudad de León, Gto.

Autorización por parte
Del Superior Jerárquico
De la Dirección

C. Salvador Arevalo
Vázquez
OFICIAL MAYOR



Validación de personal
donde se realizó la
Comisión.

Sello de
Comprobación.

**FRANQUICIATARIOS Y ASOCIADOS
DEL CENTRO, S.A. DE C.V.**
Lugar de expedición: 36110
R.F.C. FAC161124K33
Régimen Fiscal: 601 General
de ley Personas Morales

Hoja (1)	
Fecha	2021-12-01T17:30:23
No. Certificado	00001000000508856748
Serie y Folio	H 8680
Folio Fiscal	A562A94A-BA02-4DE6-83E0-837ADEC4946D
Forma y método de pago	01 Efectivo PUE Pago en una sola exhibición
Condiciones de pago	
Tipo de comprobante	I Ingreso
Moneda	MXN
Pedido No.	

Facturado a: **MUNICIPIO DE SAN LUIS DE LA PAZ**

Residencia Fiscal: **USO CFDI: G03 Gastos en general**

RFC MSL850101GC6

Cant.	Unidad	Id	Cve.	Descripción	Valor Unitario	Importe
1	Unidad de servicio(E48)	1376102102133500	90101503	CONSUMO DEL DÍA 01/12/2021, según Número de Folio 1376102102133500 Base:239.660000 Impuesto T: 002-IVA Tipo Factor:Tasa 16.00% Importe:38.350000	\$239.66	\$239.66
SUBTOTAL						\$239.66
IVA al 00.16						\$38.35
TOTAL						\$278.01

(DOSCIENTOS SETENTA Y OCHO PESOS 01/100 M.N.)



Sello Digital del CFDI

**EX3okHewXFeCOok3dWSrBB2CvpgsF73IVh6poy1rPW6XYhE/HNT/ez79W29n59nUMYmKoOEMRWHz8LHdfT+xVHbEI
hhtdivPFsQUFXPIUuAXIk8LHRlvo7XSS9u1JYs1wkEbLkV160DpRAKOKUx/HveEq4AE4nvHVftj07S7K-4A-ETOM**

Este código es el código de verificación de la firma digital del CFDI. Para más información consulte el sitio web del SAT: www.sat.gob.mx

Sello del SAT

**MslD2aacXNMfDT7wYwAQDCiFb0CkT0G9S9KfB0ZCgJfWd0Rt-2Y1j0i1p0C1j0P0PWR0fCF3C0CSTNKH
L21FR02E3Hh0cNNMBy-6a2HOv000x-7h50h3UaPgpThDQaeBV-4cc330cE9L7f0K2h0VH0cVX0g-4N03U0G
Z1e0710f0n0N1230E4P80a0g1Eip0i0gH301230P0v0PHZn0Pw-1YKA-A200+gK7Xv0Po0QUVt-72S37c230
7Fw00c30pm0G0T35UWU:ZY0G1095MBN0ps-3000120X0PKR0w0PM000V0YR0V00=**

Este código es el código de verificación de la firma digital del SAT. Para más información consulte el sitio web del SAT: www.sat.gob.mx

Sistema Original del comprobante de CFDI con sello digital del SAT

[1] [7] [5] [6] [2] [A] [9] [4] [A] [B] [A] [0] [2] [4] [D] [E] [6] [8] [3] [E] [0] [8] [3] [7] [A] [D] [E] [C] [4] [9] [4] [6] [D]
[0] [1] [2] [1] [0] [2] [1] [0] [2] [1] [3] [3] [5] [0] [0] **[M] [Y] [m] [K] [o] [O] [E] [M] [R] [W] [H] [z] [8] [L] [H] [d] [f] [T] [x] [V] [H] [b] [E] [I]**
e [7] [X] [S] [S] [9] [u] [1] [J] [Y] [s] [1] [w] [k] [E] [b] [L] [k] [V] [1] [6] [0] [D] [p] [R] [A] [K] [O] [K] [U] [x] [H] [v] [e] [E] [q] [4] [A] [E] [4] [n] [v] [H] [V] [f] [t] [j] [0] [7] [S] [7] [K] [4] [A] [E] [T] [O] [M]
[L] [2] [1] [F] [R] [0] [2] [E] [3] [H] [h] [0] [c] [N] [N] [M] [B] [y] [6] [a] [2] [H] [O] [v] [0] [0] [x] [7] [h] [5] [0] [h] [3] [U] [a] [P] [g] [p] [t] [h] [D] [Q] [a] [e] [B] [V] [4] [c] [c] [3] [3] [0] [c] [E] [9] [L] [7] [f] [0] [K] [2] [h] [0] [V] [H] [0] [c] [V] [X] [0] [g] [4] [N] [0] [3] [U] [0] [G] [Z] [1] [e] [0] [7] [1] [0] [f] [0] [n] [0] [N] [1] [2] [3] [0] [E] [4] [P] [8] [0] [a] [0] [g] [1] [E] [i] [p] [0] [i] [0] [g] [H] [3] [0] [1] [2] [3] [0] [P] [0] [v] [0] [P] [H] [Z] [n] [0] [P] [w] [1] [Y] [K] [A] [A] [2] [0] [0] [g] [K] [7] [X] [v] [0] [P] [o] [0] [Q] [U] [V] [t] [7] [2] [S] [3] [7] [c] [2] [3] [0]
[7] [F] [w] [0] [0] [c] [3] [0] [p] [m] [0] [G] [0] [T] [3] [5] [U] [W] [U] : [Z] [Y] [0] [G] [1] [0] [9] [5] [M] [B] [N] [0] [p] [s] [3] [0] [0] [1] [2] [0] [X] [0] [P] [K] [R] [0] [w] [0] [P] [M] [0] [0] [0] [V] [0] [Y] [R] [0] [V] [0] [0] =

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Folio Fiscal: A562A94A-BA02-4DE6-83E0-837ADEC4946D

No de Serie del Certificado del SAT:: 00001000000504587441 Fecha y hora de certificación: 2021-12-01T17:31:05 RFC PROVEDOR TIMBRADO: IAD121214B34

Efectos Fiscales al pago

Este documento es una representación impresa de un CFDI

Anqd Jaime C.

