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| **FACULTAD DE CIENCIAS EXACTAS Y NATURALES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **SOLICITUD DE PAGO DIRECTO A PROVEEDOR** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| DEPENDENCIA / SECTOR: | | | | | | | | FECHA SOLICITUD: | | | | | | | | | | | | | | | | | | | | | | | |
| Departamento, Dirección, Instituto, etc | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| JUSTIFICACIÓN / DESTINO DEL GASTO: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fecha | Nº Ticket/  Factura | Razón Social/proveedor | | | | | | | | | | Cantidad | | | | | | | |  | | | | | | Costo Total | | | | | |
| Costo unitario | | | | | |
|  |  |  | | | | | | | | | |  | | | | | | | |  | | | | | | 0 | | | | | |
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|  |  |  |  | | **TOTAL A PAGAR** | | | | | | | | | | | | | |  | | | | | | **0** | | | | | | |
| DATOS PARA TRANSFERENCIA BANCARIA | | | | | | | | | | |  | | | |  | | |  | | | | | |  | | | | | | |  |
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| BANCO: |  |  |  | |  | |  | |  | | | | |  | |  | | | | | |  | | | | | | |  | | |
| CUIT PROVEEDOR: | |  |  | |  | |  | |  | | | | |  | |  | | | | | |  | | | | | | |  | | |
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|  | | | |  | |  | | | | | | (firma y sello) | | | | | | | | | | | | | | |
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