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| **Fecha de solicitud** |
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| **Acuerdo:** |  |
| **No.** |  |
| **Fecha** |  |

**Entidad Prestadora**

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| **Clave de URES** |  | **Nombre de URES** | | | |  | | | | | | | |
| **Nombre** |  | | | | | | | | | | | | |
| **País** |  | | **Estado** | |  | | | | **Municipio** | | |  | |
| **Calle** |  | | | **No. Interior** | | |  | **No. Exterior** | |  | **Código Postal** | |  |

**Entidad Receptora**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Clave de URES** |  | **Nombre de URES** | | | | |  | | | | | | |
| **Nombre** |  | | | | | | | | | | | | |
| **País** |  | | **Estado** | |  | | | | **Municipio** | |  | | |
| **Calle** |  | | | **No. Interior** | |  | | **No. Exterior** | |  | | **Código Postal** |  |

**Conceptos de facturación:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Cantidad** | **Unidad** | **Concepto/Descripción** | **Valor unitario** | **Importe** |
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| **Observaciones** |
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