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| **NOMBRE SOLICITANTE** | **FERNANDO ULLOA** |
| **CENTRO DE COSTO** |  |
| **DEPARTAMENTO** | **UNOIDAD ACLE** |
| **FECHA** | **17-03-2024** |

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| **INSUMOS O ARTICULOS DE LIBRERÍA** | | |
| **DESCRIPCIÓN INSUMO SOLICITADO** | **CANTIDAD** | **OBSERVACIÓN** |
| **Cartulinas color rojo** | **2** |  |
| **Maskin tape fina** | **1** |  |
| **1 Pegamento** | **1** |  |
| **Cuaderno chico** | **1** |  |
| **RESMAN HOJA TAMAÑO CARTA** | **2** |  |
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| **NOMBRE Y FIRMA**  **QUIEN RETIRA** | **HECTOR GALINDO** |