Secretaría de Salud
Bogotá D.C.
Subred Integrada de Servicios de Salud E.S.E.

SUBRED INTEGRADA DE SERVICIOS DE SALUD CENTRO ORIENTE E.S.E.
ANEXO - GESTIÓN DE RECURSOS FINANCIEROS
FORMATO SOLICITUD DISPONIBILIDAD PRESUPUESTAL

Fecha de realización de la solicitud:	12/09/2018

DATOS DEL SOLICITANTE

Proceso y/o UPSS solicitante:	ANEXO CUADRO PARA SOLICITUD DE MODIFICACIONES	
Objeto:	ANEXO CUADRO PARA SOLICITUD DE MODIFICACIONES	
Rubro presupuestal:	RUBRO N°3213901000000000 (CONTRATACION SERVICIOS ASISTENCIALES GENERALES)	
Valor Solicitado:	$4.997.726.248	
FIRMAS	Nombre y Cargo Dirección Asociada:	ORLANDO MARTINEZ HENAO
	Nombre y Cargo Ordenador del Gasto y/o Delegatario:	LUIS FERNANDO PINEDA AVE
	Nombre del Responsable del Proceso	ANEXO CUADRO PARA SOLICITUD DE MODIFICACIONES

NOTA: De acuerdo a la Resolución No. 360 del 27 de julio de 2018, serán delegados como ordenadores del gasto: A la Subgerente Corporativa, la suscripción de los procesos de Contratación de Órdenes de Prestación de Servicios con persona natural, cuando la misma esté relacionada con el ámbito Administrativo y a la Subgerente de Servicios de Salud, la suscripción de los procesos de Contratación de Órdenes de Prestación de servicios con persona natural, cuando la misma esté relacionada con el ámbito Asistencial, según lo cuantía establecida y cuando la misma no supere los 830 SMMLV.

La anterior Resolución no es aplicable a los procesos de Contratación en Bienes y Servicios.

Subred Integrada de Servicios de Salud Centro Oriente E.S.E.	SUBSISTEMA INTEGRADO DE GESTIÓN [illegible] APOYO – GESTIÓN DE INSUMOS Y ABASTECIMIENTO FORMATO SOLICITUD DE MODIFICACIÓN AL CONTRATO	CÓDIGO: [illegible] VERSIÓN: [illegible] FECHA: [illegible]

Fecha de Solicitud (AAMMDD): 2018/08/22

No. Contrato: ANEXO CUADRO PARA SOLICITUD DE MODIFICACIONES

DATOS DE LA SOLICITUD

Contratista:	ANEXO CUADRO PARA SOLICITUD DE MODIFICACIONES
Objeto:	ANEXO CUADRO PARA SOLICITUD DE MODIFICACIONES

Adición:	X		**Valor:**	$4.599.728.745
Prórroga:	X		**Tiempo:**	HASTA EL [illegible] DE OCTUBRE DE 2018
Otro (*):				

DESCRIPCIÓN DE LA MODIFICACIÓN

(En caso de prórroga, diferente, anexar el [illegible])

Se requiere Adicionar y Prorrogar los contratos de Orden de prestación de Servicios que se relacionan en el ANEXO CUADRO PARA SOLICITUD DE MODIFICACIONES, según [illegible] por cada contrato [illegible].

JUSTIFICACIÓN DE LA MODIFICACIÓN

La Subred Integrada de Servicios de Salud Centro Oriente E.S.E. se conformó producto de la fusión de las Empresas Sociales del Estado de Salud [illegible], Santa Clara, San Cristóbal, La Victoria, Centro Oriente y San Blas, mediante Acuerdo 641 de 2016 del Concejo de Bogotá, [illegible] servicios integrales de salud de alta complejidad, [illegible] de prestadores públicos de salud del Distrito Capital, por lo que para garantizar la prestación de los servicios contratados con las Entidades Administradoras de Planes de Beneficios (EAPB), [illegible] de servicios de salud [illegible] oportunidad, pertinencia, accesibilidad, eficiencia y calidad en la atención en salud. Sin embargo, no cuenta con [illegible] planta de personal y con el fin de no interrumpir la prestación de los servicios [illegible] al 100% de la demanda de atención en cada una de sus 28 Unidades, requiere adicionar y prorrogar los contratos de prestación de servicios de salud que se relacionan en el [illegible] que hace parte integral de la presente solicitud, de conformidad [illegible].

FIRMAS		
	Nombre y Firma del Supervisor:	ANEXO CUADRO PARA SOLICITUD DE MODIFICACIONES
	Nombre y Firma: Jefe de Oficina, Director [illegible]	[illegible]
	Firma del Director [illegible]	[illegible]
	Elaborado por:	[illegible]

NOTA: De acuerdo a la Resolución No. 201 del 27 de junio de 2018, [illegible]

La presente Resolución [illegible]

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[illegible]
[illegible]

[illegible] 2018

DIRECCIÓN DE HOSPITALIZACIÓN

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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编号	名称	规格	单位	数量	单价	金额	备注
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RELACION DE ORDENES DE PRESTACION DE SERVICIOS (OPS) CONTRATADAS CUADRO No. [illegible]

[illegible] 22 DE AGOSTO 2016

[illegible] [illegible]

No.	[illegible]	NUMERO DE [illegible]	[illegible]	NOMBRE DEL CONTRATISTA	OBJETO DE LA OPS	[illegible]	[illegible]	[illegible]	[illegible]	VALOR [illegible]	[illegible]	OBSERVACIONES	RUBRO PRESUPUESTAL
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[illegible] 12 DE AGOSTO 2018

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[illegible] 30 DE AGOSTO DE 2018

[illegible] E RECIBOS DE HONORARIOS

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EL ENTE INTERMUNICIPAL DE SERVICIOS DE SALUD PATAGONIA NORTE E.I.P.E.

REGLAMENTO DE CONDICIONES DE PRESTACIÓN DE SERVICIOS (CPS) CONTRATADOS (SEGÚN RG N° 3)

ÍTEM	RENGLÓN / UNIDAD	CANTIDAD DE UNIDADES DE MEDIDA (CPS)	MARCA	MODELO / CARACTERÍSTICAS	DESCRIPCIÓN	FECHA DE INICIO DE EJECUCIÓN	FECHA DE FINALIZACIÓN	PERÍODO DE EJECUCIÓN (días / meses / años)	COSTO UNITARIO (sin IVA)	VALOR UNITARIO (con IVA)	VALOR MENSUAL ESTIMADO	OBSERVACIONES	RENGLÓN / PRESTACIÓN

[illegible]

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[illegible] 21 DE AGOSTO 2018

[illegible] DIRECCIÓN DE HOSPITALIZACIÓN Y

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[illegible]

[illegible]: 31 DE AGOSTO DE 2018

[illegible]: SECRETARÍA DE INFRAESTRUCTURA

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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SUBDIRECTORATE ... SERVICIOS DE SALUD CENTRO DE UNIDAD E.S.E.
RELACION DE COSTOS DE PRESTACION DE SERVICIOS DE SALUD CONTRATO/ORDEN DE SERVICIO

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[illegible] RELACIÓN DE ÓRDENES DE PRESTACIÓN DE SERVICIOS (OPS) CONTRATADAS [illegible] CUADRO No. 3

[illegible] 22 DE AGOSTO 2018

[illegible] DIRECCIÓN DE [illegible]

No.	[illegible]	[illegible]	[illegible]	NOMBRE CONTRATISTA	OBJETO [illegible]	[illegible]	[illegible]	[illegible]	[illegible]	VALOR [illegible]	[illegible]	[illegible]	[illegible]
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RELACIÓN DE ÓRDENES DE PRESTACIÓN DE SERVICIOS (OPS) [illegible] CUADRO N° 3

[illegible] AGOSTO 2018

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RELACIÓN DE [illegible] CONTRATADOS [illegible]

[illegible] 22 30 AGOSTO 2018

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[illegible]	[illegible]	[illegible]	[illegible]	NOMBRE CONTRATISTA	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	JUSTIFICACIÓN	[illegible]
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DIRECCION DE HOSPITALIZACION

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SUBRED INTEGRADA DE SERVICIOS DE SALUD CENTRO ORIENTE E.S.E.
RELACIÓN DE ÓRDENES DE PRESTACIÓN DE SERVICIOS DE APOYO DIAGNÓSTICO RADIOLÓGICO

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SUBSECRETARÍA DE LOS SERVICIOS DE SALUD
RELACIÓN DE OBRAS DE PRIORIDAD Y SU CORRESPONDIENTE CONTRIBUCIÓN DE MEJORAS

SECRETARÍA: SECRETARÍA DE SALUD

DEPENDENCIA: DIRECCIÓN DE HOSPITALES

AÑO DE EJERCICIO	CLAVE PRESUPUESTARIA	ZONA	NOMBRE DEL CONTRIBUYENTE	UBICACIÓN DE LA OBRA	IMPORTE TOTAL DE LA OBRA	IMPORTE PARCIAL DE LA OBRA	NÚMERO DE LOTES BENEFICIADOS	SUPERFICIE BENEFICIADA EN M2	VALOR UNITARIO M2	CUOTA DE RECUPERACIÓN	OBSERVACIONES	FECHA PROBABLE
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SUBSECRETARÍA [illegible]

PLAN DE CONTINGENCIA DE [illegible]

NOMBRE CONTRATISTA: [illegible]

UNIDAD OPERATIVA: [illegible]

ID	OBJETO DEL BIEN	NÚMERO DE CONTRATO	FECHA	NOMBRE CONTRATISTA	CARACTERÍSTICAS	FECHA DE INICIO DE EJECUCIÓN	FECHA DE TERMINACIÓN	PERIODO DE EJECUCIÓN	FECHA DE TERMINACIÓN DEL PLAN DE CONTINGENCIA	VALOR DEL CONTRATO	VALOR DEL BIEN	OBSERVACIONES	FIRMA RESPONSABLE
1	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
2	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
3	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
4	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
5	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

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[illegible]

[illegible]: 23 DE AGOSTO 2018

[illegible]: [illegible]

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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SUPERINTENDENCIA DE SERVICIOS DE SALUD

RELACIÓN DE CONTRATOS DE PRESTACIÓN DE SERVICIOS SUSCRITOS CON CARGO AL RUBRO GASTOS DE PERSONAL

MES / AÑO: AGOSTO 2016

ENTIDAD: INSTITUCIÓN DE PRUEBA DE ENTIDAD

ITEM	TIPO DE IDENTIFICACIÓN	NÚMERO DE IDENTIFICACIÓN	NOMBRE	APELLIDO	OBJETO DEL CONTRATO	FECHA DE INICIACIÓN DEL CONTRATO	FECHA DE TERMINACIÓN DEL CONTRATO	PLAZO DE EJECUCIÓN DEL CONTRATO EN MESES	VALOR MENSUAL DEL CONTRATO	VALOR TOTAL DEL CONTRATO	JUSTIFICACIÓN	NÚMERO DEL CERTIFICADO DE DISPONIBILIDAD PRESUPUESTAL
1	2	3	4	5	6	7	8	9	10	11	12	13
1	CC	1.000.000	JUAN	PEREZ	PRESTACIÓN DE SERVICIOS PROFESIONALES PARA APOYO A LA GESTIÓN EN LA OFICINA DE TECNOLOGÍAS DE LA INFORMACIÓN Y LAS COMUNICACIONES	01/08/2016	31/08/2016	1	3.000.000	3.000.000	Se requiere contratar un profesional para apoyar la gestión de la oficina de tecnologías de la información y las comunicaciones, debido a la carga laboral y a la falta de personal suficiente para atender las actividades propias de la oficina.	1234
2	CC	2.000.000	MARIA	GOMEZ	PRESTACIÓN DE SERVICIOS PROFESIONALES PARA APOYO A LA GESTIÓN EN LA OFICINA DE TECNOLOGÍAS DE LA INFORMACIÓN Y LAS COMUNICACIONES	01/08/2016	31/08/2016	1	3.500.000	3.500.000	Se requiere contratar un profesional para apoyar la gestión de la oficina de tecnologías de la información y las comunicaciones, debido a la carga laboral y a la falta de personal suficiente para atender las actividades propias de la oficina.	1235
3	CC	3.000.000	PEDRO	LOPEZ	PRESTACIÓN DE SERVICIOS PROFESIONALES PARA APOYO A LA GESTIÓN EN LA OFICINA DE TECNOLOGÍAS DE LA INFORMACIÓN Y LAS COMUNICACIONES	01/08/2016	31/08/2016	1	4.000.000	4.000.000	Se requiere contratar un profesional para apoyar la gestión de la oficina de tecnologías de la información y las comunicaciones, debido a la carga laboral y a la falta de personal suficiente para atender las actividades propias de la oficina.	1236
4	CC	4.000.000	ANA	RODRIGUEZ	PRESTACIÓN DE SERVICIOS PROFESIONALES PARA APOYO A LA GESTIÓN EN LA OFICINA DE TECNOLOGÍAS DE LA INFORMACIÓN Y LAS COMUNICACIONES	01/08/2016	31/08/2016	1	4.500.000	4.500.000	Se requiere contratar un profesional para apoyar la gestión de la oficina de tecnologías de la información y las comunicaciones, debido a la carga laboral y a la falta de personal suficiente para atender las actividades propias de la oficina.	1237
5	CC	5.000.000	LUIS	MARTINEZ	PRESTACIÓN DE SERVICIOS PROFESIONALES PARA APOYO A LA GESTIÓN EN LA OFICINA DE TECNOLOGÍAS DE LA INFORMACIÓN Y LAS COMUNICACIONES	01/08/2016	31/08/2016	1	5.000.000	5.000.000	Se requiere contratar un profesional para apoyar la gestión de la oficina de tecnologías de la información y las comunicaciones, debido a la carga laboral y a la falta de personal suficiente para atender las actividades propias de la oficina.	1238

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SUJETO DE LA UNIDAD DE LA DIVISIÓN DE MANTENIMIENTO PREVENTIVO

RELACIÓN DE ENCARGO DE POLIZA PARA EL SERVICIO DE [illegible] MANTENIMIENTO

[illegible] 30 DE MAYO DE 2018

[illegible] DIRECCIÓN DE MANTENIMIENTO

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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RELACION DE DOCUMENTOS EN GESTION DE COBRO [illegible]

[illegible] 31 DE AGOSTO DE 2015

[illegible] [illegible]

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SUBSECRETARÍA DE SERVICIOS DE SALUD CENTRO ORIENTE S.A.

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[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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FECHA: 21 DE AGOSTO 2015

DIRECCIÓN: DIRECCIÓN DE INVESTIGACIÓN

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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[illegible] 22 DE AGOSTO 2018

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SUBDIRECCIÓN DE [illegible]

RELACIÓN DE [illegible]

[illegible] 2021

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AGOSTO 2015

DIRECCION DE [illegible]

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[illegible] 31 DE AGOSTO 2018

[illegible] DIRECCIÓN DE ADMINISTRACIÓN

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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[illegible] 22 DE AGOSTO 2018

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SSSU

SELECCIÓN DE OFERTAS DE PRESTACIÓN DE SERVICIOS [illegible]

[illegible] 31 DE AGOSTO DE

[illegible] DIRECCIÓN DE HOSPITALIDAD

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DIRECCIÓN DE HOSPITALIZACIÓN

FORMATO [illegible]

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RELACIÓN DE ÓRDENES [illegible]

EMISIÓN AL 23 DE AGOSTO 2018

ÓRDENES [illegible]

番号	名称	数量	単位	単価	金額	備考
1						
2						
3						
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5						

[illegible]

[illegible]

[illegible]

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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[illegible]

[illegible]

[illegible] DE SALUD DEL [illegible] E.S.E.
RELACION DE PROCESOS Y RELACION DE CONTRATOS SUSCRITOS VIGENCIA 2021

[illegible]: [illegible]

[illegible]: [illegible]

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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[illegible]: DIRECCIÓN DE EVALUACIÓN

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

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[illegible]: 31 DE AGOSTO 2018

[illegible]: DIRECCIÓN DE ADQUISICIONES

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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[illegible]

[illegible] 23 DE AGOSTO 2015

[illegible] PUBLICACIÓN DE NOMINACIONES

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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[illegible] 22 DE AGOSTO 2018

[illegible] ELECCIONES HOSPITALARIAS Y

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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年	月	日	曜日	天気	気温	湿度	風向	風速	降水量	備考
令和	1	1	水	晴	5.2	42	北西	3.1	0.0	元日
令和	1	2	木	晴	6.0	40	北西	2.8	0.0	
令和	1	3	金	晴	6.4	38	北	2.5	0.0	
令和	1	4	土	晴	7.1	35	北	2.2	0.0	
令和	1	5	日	晴	7.8	33	北東	1.9	0.0	
令和	1	6	月	晴	8.3	31	北東	1.7	0.0	
令和	1	7	火	晴	8.9	30	東	1.5	0.0	
令和	1	8	水	晴	9.4	29	東	1.4	0.0	
令和	1	9	木	晴	9.8	28	東	1.3	0.0	
令和	1	10	金	晴	10.2	27	東	1.2	0.0	
令和	1	11	土	晴	10.6	26	東	1.1	0.0	
令和	1	12	日	晴	11.0	25	東	1.0	0.0	
令和	1	13	月	晴	11.3	24	東	0.9	0.0	
令和	1	14	火	晴	11.7	23	東	0.8	0.0	
令和	1	15	水	晴	12.0	22	東	0.8	0.0	
令和	1	16	木	晴	12.3	21	東	0.7	0.0	
令和	1	17	金	晴	12.6	20	東	0.7	0.0	
令和	1	18	土	晴	12.9	19	東	0.6	0.0	
令和	1	19	日	晴	13.2	18	東	0.6	0.0	
令和	1	20	月	晴	13.4	17	東	0.5	0.0	
令和	1	21	火	晴	13.7	16	東	0.5	0.0	
令和	1	22	水	晴	13.9	15	東	0.4	0.0	
令和	1	23	木	晴	14.1	14	東	0.4	0.0	
令和	1	24	金	晴	14.3	13	東	0.3	0.0	
令和	1	25	土	晴	14.5	12	東	0.3	0.0	
令和	1	26	日	晴	14.7	11	東	0.2	0.0	
令和	1	27	月	晴	14.8	10	東	0.2	0.0	
令和	1	28	火	晴	15.0	9	東	0.1	0.0	
令和	1	29	水	晴	15.1	8	東	0.1	0.0	
令和	1	30	木	晴	15.2	7	東	0.0	0.0	
令和	1	31	金	晴	15.3	6	東	0.0	0.0	

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[illegible] 22 DE AGOSTO 2008

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[illegible] AL 31 AGOSTO 2017

[illegible] DIRECCIÓN DE PLANEACIÓN

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
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SUJETO OBLIGADO: [illegible]

ÁREA RESPONSABLE: [illegible]

EJERCICIO: 2016

PERIODO: 01 ENERO - 31 DICIEMBRE 2016

| ÁREA RESPONSABLE | EJERCICIO | PERIODO | NOMBRE(S) DEL SERVIDOR PÚBLICO | PRIMER APELLIDO DEL SERVIDOR PÚBLICO | SEGUNDO APELLIDO DEL SERVIDOR PÚBLICO | DENOMINACIÓN DEL PUESTO | CLAVE O NIVEL DEL PUESTO | FUNCIÓN PRINCIPAL DEL SERVIDOR PÚBLICO | TIPO DE CONTRATACIÓN | PERCEPCIÓN ORDINARIA BRUTA MENSUAL | PERCEPCIÓN ORDINARIA NETA MENSUAL | PERCEPCIÓN EXTRAORDINARIA BRUTA MENSUAL | PERCEPCIÓN EXTRAORDINARIA NETA MENSUAL | PERCEPCIÓN ORDINARIA BRUTA ANUAL | PERCEPCIÓN ORDINARIA NETA ANUAL | PERCEPCIÓN EXTRAORDINARIA BRUTA ANUAL | PERCEPCIÓN EXTRAORDINARIA NETA ANUAL | PERCEPCIÓN TOTAL ANUAL NETA | PERCEPCIÓN TOTAL ANUAL BRUTA | DESCRIPCIÓN DE PERCEPCIONES EXTRAORDINARIAS | DESCRIPCIÓN DE PERCEPCIONES ORDINARIAS | DESCRIPCIÓN DE PERCEPCIONES TOTALES | HIPERVÍNCULO AL TABULADOR DE REMUNERACIONES | HIPERVÍNCULO AL CATÁLOGO DE PUESTOS | HIPERVÍNCULO A LA DESCRIPCIÓN DE PUESTOS | HIPERVÍNCULO A LA NORMATIVIDAD APLICABLE

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[illegible] 31 DE AGOSTO 2018

DIRECCIÓN DE PLANEACIÓN

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SECRETARÍA DE SALUD DISTRITO CAPITAL

RELACIÓN DE PAGOS – [illegible]

FECHA: 31 DE AGOSTO DE 2008

RESPONSABLE: DIRECCIÓN DE HOSPITALIZACIÓN

ORDEN DE PAGO	No. CONTRATO O CONVENIO	CÉDULA	NOMBRE O RAZÓN SOCIAL	OBJETO DEL PAGO	VALOR DE LA FACTURA	VALOR DE LA RETENCIÓN	PORCENTAJE DE LA RETENCIÓN	VALOR RETENIDO	VALOR NETO A PAGAR	OBSERVACIÓN	FIRMA BENEFICIARIO

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[illegible]	[illegible]

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[illegible] 23 DE AGOSTO 2018

[illegible] DIRECCIÓN DE EVALUACIÓN

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[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

SUBSECRETARÍA DE [illegible] DE SERVICIOS ADMINISTRATIVOS S.A. DE C.V.

RELACIÓN DE ÓRDENES DE PRESTACIÓN DE SERVICIOS (ORPS) CONTRATADOS DURANTE EL MES DE

FECHA DE EMISIÓN: 22 DE AGOSTO DE 2018

ÁREA SOLICITANTE: SUBSECRETARÍA DE ADMINISTRACIÓN

No.	NOMBRE COMPLETO	NÚMERO DE CONTRATO DE PRESTACIÓN DE SERVICIOS	PUESTO	NOMBRE CONTRATISTA	OBJETO DE LA ORPS	LUGAR DE PRESTACIÓN DEL SERVICIO	FECHA DE INICIO	FECHA DE TERMINACIÓN	TIEMPO DE VIGENCIA DE LA ORPS	MONTO MENSUAL	OBSERVACIONES	FIRMA
1												
2												
3												
4												
5												

| | | |

[illegible] DE PRESTACIÓN DE SERVICIOS DE APOYO A LA GESTIÓN [illegible]

RELACIÓN DE ADICIÓN Y DE PRÓRROGA DE CONTRATOS DE PRESTACIÓN DE SERVICIOS 2021 CONTRATACIÓN DIRECTA NO. 1

ID DEPARTAMENTO: ALCALDÍA DE BOGOTÁ D.C.

DEPARTAMENTO: DIRECCIÓN DE INSPECCIÓN Y VIGILANCIA

JUNIO 2021	NÚMERO DE CONTRATO 2021	CLASE	NOMBRE CONTRATISTA	OBJETO DEL CONTRATO	FECHA DE INICIO DEL CONTRATO	FECHA DE TERMINACIÓN	PRÓRROGAS	FECHA TERMINACIÓN DESPUÉS DE LA PRÓRROGA	VALOR MENSUAL	VALOR TOTAL DEL CONTRATO	OBSERVACIONES	FIRMA CONTRATISTA

序号	名称	规格型号	单位	数量	单价	金额	备注
1	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
2	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
3	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
4	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
5	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

[illegible]

[illegible]: 12 DE AGOSTO 2015

[illegible]: [illegible]

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

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SALUD

SECRETARÍA DE SALUD

FECHA DE ACTUALIZACIÓN: 31 DE MARZO DE 2018

RESPONSABLE DE LA INFORMACIÓN: DIRECCIÓN DE RECURSOS FINANCIEROS

NÚMERO DE CONTRATO O CONVENIO	TIPO DE CONTRATO O CONVENIO	OBJETO	NOMBRE O RAZÓN SOCIAL DEL PROVEEDOR O CONTRATISTA	FECHA DE INICIO DEL CONTRATO O CONVENIO	FECHA DE TERMINACIÓN	MONTO MÁXIMO DEL CONTRATO O CONVENIO SIN IVA	MONTO MÁXIMO DEL CONTRATO O CONVENIO CON IVA	MONTO MÍNIMO SIN IVA	MONTO MÍNIMO CON IVA	MONTO MÁXIMO DE LA ADICIÓN	NOTAS ACLARATORIAS	HIPERVÍNCULO AL CONTRATO O CONVENIO

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SUBSECRETARÍA DE SERVICIOS DE INTELIGENCIA DEL ESTADO

RELACIÓN DE BIENES DE PROPIEDAD DE SUPERIORES (APTO CRIPTOGRÁFICO) LLAVE NRO. 1

FECHA: 30 de AGOSTO de 2018

DEPENDENCIA: DIRECCIÓN DE CONTRAINTELIGENCIA

ÍTEM	CANTIDAD	DETALLE	NOMBRE Y APELLIDO	CARGO	FECHA DE ENTREGA	FECHA DE DEVOLUCIÓN	FIRMA	OBSERVACIONES	VALOR UNITARIO	VALOR TOTAL	NOTA/S	FIRMA
1	1	1	1	1	1	1	1	1	1	1	1	1