

| FORMATO CONTROL DE ENTRADA Y SALIDA DE PRODUCTOS ASEO PERSONAL COLABORADORES.                                                                       |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
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| UNIDAD OPERATIVA: FUNDACION CELESTIN FREINET JARDIN INFANTIL COFINANCIADO RINCON                                                                    |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
| MES: DICIEMBRE                                                                                                                                      |              |                    | AÑO: 2024        |                                               |      | RESPONSABLE DEL SERVICIO: MARICELA ROJAS T |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      | ASOCIADO FUNDACION CELESTIN FREINET |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
| ELEMENTO                                                                                                                                            | PRESENTACIÓN | SALDO MES ANTERIOR | FECHA DE INGRESO | PRIMERA SEMANA                                |      |                                            |       |   |                | SALDO SEMANA ANTERIOR | FECHA DE INGRESO | CANTIDAD QUE INGRESA | SEGUNDA SEMANA    |   |    |   |   | SALDO SEMANA ANTERIOR | FECHA DE INGRESO | CANTIDAD QUE INGRESA | TERCERA SEMANA                      |                   |       |    |   | SALDO SEMANA ANTERIOR | FECHA DE INGRESO | CANTIDAD QUE INGRESA | CUARTA SEMANA  |                   |   |   |    | SALDO SEMANA ANTERIOR | FECHA DE INGRESO | CANTIDAD QUE INGRESA | QUINTA SEMANA |       |   |   |    | SALDO MES |   |   |   |   |   |       |   |
|                                                                                                                                                     |              |                    |                  | CANTIDAD QUE SALE                             |      |                                            |       |   | DÍA CALENDARIO |                       |                  |                      | CANTIDAD QUE SALE |   |    |   |   |                       |                  |                      | DÍA CALENDARIO                      | CANTIDAD QUE SALE |       |    |   |                       |                  |                      | DÍA CALENDARIO | CANTIDAD QUE SALE |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
|                                                                                                                                                     |              |                    |                  | L                                             | M    | MC                                         | J     | V |                |                       |                  |                      | L                 | M | MC | J | V |                       |                  |                      |                                     | L                 | M     | MC | J |                       |                  |                      |                | V                 | L | M | MC |                       |                  |                      | J             | V     | L | M | MC |           | J | V |   |   |   |       |   |
|                                                                                                                                                     |              |                    |                  | 2                                             | 3    | 4                                          | 5     | 6 |                |                       |                  |                      | 2                 | 3 | 4  | 5 | 6 |                       |                  |                      |                                     | 2                 | 3     | 4  | 5 |                       |                  |                      |                | 6                 | 2 | 3 | 4  |                       |                  |                      | 5             | 6     | 2 | 3 | 4  |           | 5 | 6 | 2 | 3 | 4 | 5     | 6 |
|                                                                                                                                                     |              |                    |                  | TAPABOCAS ADULTOS TERMOSELLADOS X 50 UNIDADES | CAJA | 0                                          | 2-Dec | 2 |                |                       |                  |                      | 1                 |   |    | 1 |   |                       |                  |                      |                                     | 0                 | 2-Dec | 0  |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      | 0             | 2-Dec | 0 |   |    |           |   |   |   |   | 0 | 2-Dec | 0 |
| COFIAS X 100 UNIDADES                                                                                                                               | PAQUETE      | 0                  | 2-Dec            | 1                                             | 1    |                                            |       |   |                | 0                     | 2-Dec            | 0                    |                   |   |    |   |   |                       | 0                | 2-Dec                | 0                                   |                   |       |    |   |                       |                  | 0                    | 2-Dec          | 0                 |   |   |    |                       |                  |                      | 0             | 2-Dec | 0 |   |    |           |   |   | 0 |   |   |       |   |
| PAPEL HIGIENICO INDUSTRIAL TRIPLE HOJA * 250 METROS                                                                                                 | ROLLOS       | 0                  | 2-Dec            | 1                                             |      | 1                                          |       |   |                | 0                     | 2-Dec            | 0                    |                   |   |    |   |   |                       | 0                | 2-Dec                | 0                                   |                   |       |    |   |                       |                  | 0                    | 2-Dec          | 0                 |   |   |    |                       |                  |                      | 0             | 2-Dec | 0 |   |    |           |   |   | 0 |   |   |       |   |
| TOALLA DE PAPEL X 150 UNID                                                                                                                          | PAQUETE      | 0                  | 2-Dec            | 8                                             | 2    | 1                                          | 2     | 2 | 1              | 0                     | 2-Dec            | 0                    |                   |   |    |   |   |                       | 0                | 2-Dec                | 0                                   |                   |       |    |   |                       |                  | 0                    | 2-Dec          | 0                 |   |   |    |                       |                  |                      | 0             | 2-Dec | 0 |   |    |           |   |   | 0 |   |   |       |   |
| BATA DESECHABLE                                                                                                                                     | UNIDAD       | 0                  | 2-Dec            | 0                                             |      |                                            |       |   |                | 0                     | 2-Dec            | 0                    |                   |   |    |   |   |                       | 0                | 2-Dec                | 0                                   |                   |       |    |   |                       |                  | 0                    | 2-Dec          | 0                 |   |   |    |                       |                  |                      | 0             | 2-Dec | 0 |   |    |           |   |   | 0 |   |   |       |   |
| DELANTALES BLANCOS PLASTICOS                                                                                                                        | UNIDAD       | 0                  | 2-Dec            | 3                                             | 3    |                                            |       |   |                | 0                     | 2-Dec            | 0                    |                   |   |    |   |   |                       | 0                | 2-Dec                | 0                                   |                   |       |    |   |                       |                  | 0                    | 2-Dec          | 0                 |   |   |    |                       |                  |                      | 0             | 2-Dec | 0 |   |    |           |   |   | 0 |   |   |       |   |
| JABON LIQUIDO ANTIBACTERIAL GALON *3.75 LT                                                                                                          | GALON        | 0                  | 2-Dec            | 1                                             | 1    |                                            |       |   |                | 0                     | 2-Dec            | 0                    |                   |   |    |   |   |                       | 0                | 2-Dec                | 0                                   |                   |       |    |   |                       |                  | 0                    | 2-Dec          | 0                 |   |   |    |                       |                  |                      | 0             | 2-Dec | 0 |   |    |           |   |   | 0 |   |   |       |   |
| GUANTES LATEX BLANCOS *100 UNIDADES                                                                                                                 | CAJA         | 0                  | 2-Dec            | 0                                             |      |                                            |       |   |                | 0                     | 2-Dec            | 0                    |                   |   |    |   |   |                       | 0                | 2-Dec                | 0                                   |                   |       |    |   |                       |                  | 0                    | 2-Dec          | 0                 |   |   |    |                       |                  |                      | 0             | 2-Dec | 0 |   |    |           |   |   | 0 |   |   |       |   |
|                                                                                                                                                     |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
|                                                                                                                                                     |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
|                                                                                                                                                     |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
|                                                                                                                                                     |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
|                                                                                                                                                     |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
|                                                                                                                                                     |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
|                                                                                                                                                     |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
|                                                                                                                                                     |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
|                                                                                                                                                     |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
|                                                                                                                                                     |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
|                                                                                                                                                     |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
| NOMBRES Y APELLIDOS COMPLETOS: MARICELA ROJAS TORRES TIPO DE DOCUMENTO: CC N° de DOCUMENTO DE IDENTIDAD: 1073671572 CARGO: RESPONSABLE DEL SERVICIO |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
| PARA DILIGENCIAR ESTE FORMATO, VER INSTRUCCIONES PARA EL DILIGENCIAMIENTO.                                                                          |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |
| OBSERVACIONES:                                                                                                                                      |              |                    |                  |                                               |      |                                            |       |   |                |                       |                  |                      |                   |   |    |   |   |                       |                  |                      |                                     |                   |       |    |   |                       |                  |                      |                |                   |   |   |    |                       |                  |                      |               |       |   |   |    |           |   |   |   |   |   |       |   |

