

2025 04 11 2,550,000.00

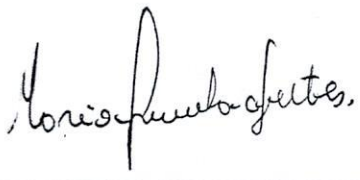
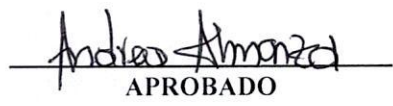
TOVAR BOZO DAYANA GINETH

DOS MILLONES QUINIENTOS CINCUENTA MIL PESOS MCTE

|                                                                               |                                                         |                                             |                                         |
|-------------------------------------------------------------------------------|---------------------------------------------------------|---------------------------------------------|-----------------------------------------|
| <b>ESE HOSPITAL SAN JOSE DE GUADUAS</b><br><b>NIT. 860020283</b>              |                                                         | <b>COMPROBANTE<br/>DE EGRESO No. 19,996</b> |                                         |
| <b>Fecha :</b> 11/abril/2025                                                  | <b>Pagado a :</b> 1003616309-7 TOVAR BOZO DAYANA GINETH |                                             |                                         |
| <b>La Suma de :</b> DOS MILLONES QUINIENTOS CINCUENTA MIL PESOS MCTE<br>..... |                                                         | <b>Valor \$</b>                             | 2,550,000.00                            |
| <b>Banco :</b> 01 BANCO DAVIVIENDA S.A                                        |                                                         |                                             |                                         |
| <b>Cuenta :</b> 45 4670-0004-3308                                             | <b>Cheque :</b> PE                                      |                                             |                                         |
| <b>POR CONCEPTO DE</b> PIC CAPARRAPI                                          |                                                         |                                             |                                         |
| <b>No.</b> 42,998                                                             | <b>Fact</b>                                             | <b>Valor Bruto \$</b> 2,550,000.00          | <b>Valor Neto \$</b> 2,550,000.00       |
| <b>Codigo</b>                                                                 | <b>Descripcion</b>                                      | <b>Valor</b>                                |                                         |
| <b>MOVIMIENTO PRESUPUESTAL</b>                                                |                                                         |                                             |                                         |
| <b>GIRO</b>                                                                   | <b>OBLIGACION</b>                                       | <b>REGISTRO</b>                             | <b>CDP</b>                              |
| 485                                                                           | 414                                                     | 179                                         | 200                                     |
|                                                                               |                                                         | <b>COD. ARTICULO</b>                        | <b>ARTÍCULO</b>                         |
|                                                                               |                                                         | 245020900303                                | Servicios para la comunidad - Operativo |
|                                                                               |                                                         |                                             | <b>VALOR</b>                            |
|                                                                               |                                                         |                                             | 2,550,000.00                            |

|                        |                         |
|------------------------|-------------------------|
| <b>TOTAL IMPUESTOS</b> | <b>TOTAL DESCUENTOS</b> |
|------------------------|-------------------------|

| CUENTA    | NOMBRE CUENTA                           | DEBITOS      | CREDITOS     |
|-----------|-----------------------------------------|--------------|--------------|
| 111006065 | BANCO DAVIVIENDA CTA 3308 PIC CAPARRAPI | 0.00         | 2,550,000.00 |
| 249055001 | SERVICIOS                               | 2,550,000.00 | 0.00         |

|                                                                                                 |                                                         |                                                                                                  |  |
|-------------------------------------------------------------------------------------------------|---------------------------------------------------------|--------------------------------------------------------------------------------------------------|--|
| <b>ESE HOSPITAL SAN JOSE DE GUADUAS</b><br><b>NIT. 860020283</b>                                |                                                         | <b>COMPROBANTE DE EGRESO No. 19,996</b>                                                          |  |
| <b>Fecha :</b> 11/abril/2025                                                                    | <b>Pagado a :</b> 1003616309-7 TOVAR BOZO DAYANA GINETH |                                                                                                  |  |
| <b>La Suma de :</b> DOS MILLONES QUINIENTOS CINCUENTA MIL PESOS MCTE<br><small>*****</small>    |                                                         | <b>Valor \$</b> 2,550,000.00                                                                     |  |
| <b>Banco :</b> 01 BANCO DAVIVIENDA S.A<br><b>Cuenta :</b> 45 4670-0004-3308                     |                                                         | <b>Cheque :</b> PE                                                                               |  |
| Recibí: _____<br>Nombre: _____<br>C.C. No. _____ de _____<br>Firma: _____                       |                                                         | Huella dactilar                                                                                  |  |
| <b>OBSERVACIONES:</b> CANCELACION SERV PIC CAPARRAPI                                            |                                                         |                                                                                                  |  |
| <br>ELABORADO |                                                         | <br>APROBADO |  |
| Usuario Imprime: MFCIFUENTES<br>Usuario Responsable: MFCIFUENTE<br>Hora: 11:30                  |                                                         |                                                                                                  |  |