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| Fundación Ciudad del Niño Administración Central | **FORMULARIO** | **Código** | **F-SGC-016** |
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| SOLICITUD DE COMPRA | Revisión | 1 |
| Fecha Rev. | 02.ABR.23 |

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| Solicitud de Materiales |
|  |
| Solicitud de Cotización |

A :

DIRECCIÓN SOLICITANTE : FECHA:

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| **Vº Bº PARA COTIZACION** | **SI** | **NO** |  |  **V°B° RESPONSABLE** |  |

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| **APRUEBA COTIZACION** |  **SI** | **NO** |  |  |  |

PROVEEDOR : AT. A FONO:

PRODUCTOS A COTIZAR :

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| **DETALLE** | **PRECIO UNITARIO** | **OBSERVACIONES.** |
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 **ENCARGADA/O DE COMPRAS**

 **FIRMA DIRECTOR**