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| **CONTRATO Nº XX** | | | | | | | | | |
| Serie: |  | | | | | Sub-serie: |  | | |
| Nombre persona Juridica / empresa: | | | |  | | | | | |
| Objeto | | | | | | | | | |
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| Carpeta Nº | |  | Hoja Nº | |  | | | Correlativo: |  |

| FECHA DEL DOCUMENTO | DOCUMENTO | FOLIOS |
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FIN DE LISTADO

Firma \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Firma de revisión \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contratista que elaboró Responsable de archivo de la dependencia

CPS\_XXXX \_ 2022 CPS\_XXXX\_2022

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| **Nº VERSIÓN** | **FECHA** | **DESCRIPCIÓN DEL CAMBIO** |
| **1** | PENDIENTE VER | Versión inicial del formato |
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