



CORPORACIÓN MUNICIPAL  
DE EDUCACIÓN Y SERVICIOS  
TEAMON FREIRE  
DALCAHUE

Nº OC: 45588

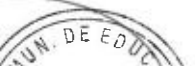
AREA NEGOCIO **SALUD**  
CENTRO COSTO **Posta Puchauran**

|            |                            |                      |              |
|------------|----------------------------|----------------------|--------------|
| Nombre:    | JOSE LUIS OJEDA BUSTAMANTE | R.:                  |              |
| Dirección: | Avda. Mocopulli            | Numero_Direccion 470 | Departamento |
| Comuna :   | Dalcahue                   |                      |              |
| Teléfono:  | 642268                     |                      |              |
| Fax:       |                            |                      |              |

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|              |              |
|--------------|--------------|
| Descuento    |              |
| <b>Total</b> | <b>35700</b> |

ESTE MATERIAL FUE SOLICITADO POR:  
MARCELO BERTIN PEREZ Y SE DESTINARA A POSTA PUCHAURAN CAMBIO DE CHAPA BODEGA ASEO

|                                                                                                                                                                                                           |                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                            |
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| <br><br><b>SUBDIRECTOR FINANZAS</b> | <br><b>DIRECTOR DEPARTAMENTO</b><br><br><b>UNIDAD DE CONTROL</b> | <br><b>JEFE ADM. Y FINANZAS</b><br><br><b>SECRETARIO GENERAL</b> |
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