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| **NOMBRE DE LA EMPRESA** |
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| **Pago a Becarios del Programa de Apoyo a la Inserción Laboral** |
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| **QUE REPRESENTA EL PERIODO CORRESPONDIENTE DEL \_\_\_\_\_ AL \_\_\_\_\_ DE \_\_\_\_\_\_\_\_\_\_\_\_\_\_ DE 2019** |
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|  | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** |
| **Descuento Por Ausencia** |
| **NOMBRE** | **HORAS MENSUALES** | **HORAS QUINCENALES TRABAJADAS** | **SALARIO X HORA** | **SALARIO MENSUAL** | **SALARIO** **QUINCENAL BRUTO** |  **HORAS** | **$ MONTO** | **SALARIO QUINCENAL NETO** | **NUMERO DE CHEQUE** | **PAGO MITRADEL** | **PAGO** **EMPRESA** |
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| TOTALES |  |  |  |  |  |  |  |  |  |  |   |
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