 **ANEXO 1**

**ACTA DE RECONOCIMIENTO DE ESTABLECIMIENTOS PARA EFECTOS DEL INVENTARIO FISICO DE BIENES MUEBLES, MAQUINARIAS Y EQUIPOS**

**MUNICIPALIDAD DE CURARREHUE**

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| **Nº** | **ESTABLECIMIENTO** | **CLASIFICACION** | | | **OFICINA/DEPENDENCIA** | **NOMBRE RESPONSABLE DE LA OFICINA/DEPENDENCIA** |
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**\*Clasificación: A: Municipalidad B: Depto. Educación C: Depto. Salud**

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**Jefe de Unidad**