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| **ACTA DE VISITA DE CAMPO No. 000** |
| **ACTIVIDAD:** |  |
| **RESPONSABLE:** |  |
| **FECHA:** |  | **HORA INICIAL** |  | **HORA FINAL**  |  |
| **CONVOCADOS** |
| **NOMBRE** | **CARGO** | **NOMBRE** | **CARGO** |
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| **ASIGNACIONES, REVISIONES Y APELACIONES** |
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| **NOMBRE** | **DIRECCION** | **BARRIO** | **ST** | **MZ** | **LD** |
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| **FIRMAN LOS ASISTENTES** |
| **FIRMA** | **FIRMA** | **FIRMA** |
| **NOMBRE** | **NOMBRE** | **NOMBRE** |
| **CARGO** | **CARGO** | **CARGO** |