SRE

SECRETARÍA DE RELACIONES EXTERIORES

Dirección General de Programación, Organización y Presupuesto

COMPROBACIÓN DE VIÁTICOS

Número DGPOP: PENDIENTE

No. de comisión UR: 212 - 0117/2021

Fecha: 18/05/2021

DATOS DE LA COMISIÓN

Nombre del comisionado: JESUS ALEJANDRO SANCHEZ DE LA ROSA

Puesto: TERCER SECRETARIO

Destino: TAMPA, FL, Estados Unidos de América; ORLANDO, FL, Estados Unidos de América

Período: Del 23 de abril al 25 de abril de 2021

Representación: CONSULMEX ORLANDO

GASTOS EFECTUADOS DURANTE LA COMISIÓN

Fecha	Descripción	No. Docto.	Divisa	Importe	T.C.	Importe a comprobar	
HOSPEDAJE							
Del 23/04/2021 al 25/04/2021	HOTEL 2 NOCHES (23 Y 24 DE ABRIL 2021).	145733	USD	296.00	1.0000000	296.00	USD
					Subtotal:	296.00	USD

OTROS GASTOS

Fecha	Descripción	No. Docto.	Divisa	Importe	T.C.	Importe a comprobar	
Del 23/04/2021 al 25/04/2021	DESAYUNO DEL 24 DE ABRIL (HONEY ALMOND MILJ FLTA	24042021 S	USD	35.00	1.0000000	35.00	USD
Del 23/04/2021 al 25/04/2021	COMIDA 24 DE ABRIL(CALAMARI, MEZZALUNE, ESPARRAC	24042021 C	USD	105.00	1.0000000	105.00	USD
Del 23/04/2021 al 25/04/2021	CENA 24 DE ABRIL(CALDO DE POLLO, FAJITAS Y ARROZ C	24052021 D	USD	65.00	1.0000000	65.00	USD
Del 23/04/2021 al 25/04/2021	DESAYUNO 24 DE ABRIL (GRANDMA SAMPLERS, CAFÉ Y T	25042021 C	USD	40.00	1.0000000	40.00	USD
Del 23/04/2021 al 25/04/2021	COMIDA 25 DE ABRIL (HICKEN GRILL CHICKEN, FRIES, SO	25042021 P	USD	115.00	1.0000000	115.00	USD
					Subtotal:	360.00	USD

	M.N.	USD	EUR
*Importe del anticipo otorgado	0.00	640.00	0.00
Menos total comprobado		656.00	
= Recursos no utilizados			

No. trámite de reintegro:

Declaro bajo protesta de decir verdad que los datos contenidos en este formato son los solicitados

Comisionado

JESUS ALEJANDRO SANCHEZ DE LA ROSA
TERCER SECRETARIO

Tampa.
comisión
Alex.

Holiday Inn
& Suites

04-25-21

Jesus Alejandro Sanchez **Consulado de Mexico** **2550 Technology Dr.** **Orlando, FL. 32804** **United States**	Folio No. : **145733** A/R Number : Group Code : Company : **Gobierno De Mexico** Membership No. : **PC 236694332** Invoice No. :	Room No. : **112** Arrival : **04-23-21** Departure : **04-25-21** Conf. No. : Rate Code : **IGN2R** Page No. : **1 of 1**

Date	Description		Charges	Credits
04-23-21	*Room		148.00	
04-24-21	*Room		148.00	
04-25-21	MasterCard	XXXXXXXXXXXX6913		296.00
		Total	**296.00**	**296.00**
		Balance	**0.00**	

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Guest Signature:

I have received the goods and / or services in the amount show here in. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part of the full amount of these charges. if a credit card changer, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

ÚNICO DOCUMENTO
COMPROBATORIA DEL GASTO

Juan José Sabines Guerrero
Cónsul Titular

Give us your feedback. You will receive a survey from Holiday Inn about your stay with us. If for any reason you cannot rate us a 10 for your overall satisfaction our management wants to know. Additional reviews can be posted on Trip Advisor "Holiday Inn & Suites Tampa North - Busch Gardens Area". We value your opinion and fe