**Tipo de Bien: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nombre de Quien Entrega: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Fecha de Entrega** | **Descripción del Equipo, Material, Reactivo e Insumo** | **Cantidad** | **Área de Laboratorio** | **Nombre de Quien Recibe** |
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