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| --- | --- |
|  **Departamento:** |  |
| **Tutor docente:** |  | DNI |  |
| **Alumnos tutorados:** |  |

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| **Nº visita** | **Fecha:** | **Hora Sal/Lleg.** | **Concepto visita:** | **Lugar de visita:** | **Localidad:** | **Km:** |
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| **Total Kms.** |  |

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| --- | --- |
| **Importe de indemnización a percibir por gasto de desplazamiento por la utilización de:** | **Importe** |
| Vehículo particular | **€** |
| Parking | **€** |
| Autopista | **€** |
| Otros:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **€** |
| **Total** | **€** |

Adjunto resguardos acreditativos:

🞎 Parking

🞎 Autopista

🞎Otros:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
|  , **€** |

**Ingresar en:**

 **Datos bancarios**

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| **IBAN** | **ENTIDAD** | **SUSCURSAL** | **D.C.** | **Nº CUENTA** |

Marbella, \_\_\_ de \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ de 20\_\_\_\_

 Fdo.- \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Tutor FCT