



R.U.C.: 1990902034001

## FACTURA

No. : 001-100-000017554

NUMERO DE AUTORIZACION

0502202501199090203400120011000000175540000000111

FECHA Y HORA DE AUTORIZACION

2025-02-05T21:23:26-05:00

AMBIENTE : PRODUCCION

EMISION : NORMAL

CLAVE DE ACCESO



0502202501199090203400120011000000175540000000111

HOSPITAL DEL DIA VIRGEN DE GUADALUPE

Direccion Matriz: ZAMORA CHINCHIPE / ZAMORA / GUADALUPE / SN

OBLIGADO A LLEVAR CONTABILIDAD : NO

Dir Sucursal :ZAMORA CHINCHIPE / ZAMORA / GUADALUPE / SN

REGIMEN GENERAL

Razon Social / Nombres y Apellidos:

FLORA INES LAVANDA MALDONADO

Identificacion: 1101458246

Fecha Emision: 05/02/2025

Guia Remision:

Direccion: EL TAMBO - ZAMORA

Telefono :

Email:

| Cod. Principal                                                                     | Cant. | Descripcion             | Detalle Adicional         | Precio Unitario | Descuento | Precio Total |
|------------------------------------------------------------------------------------|-------|-------------------------|---------------------------|-----------------|-----------|--------------|
| 552                                                                                | 1.00  | EXAMEN BIOMETRIA        |                           | 6.00            | 0.00      | 6.00         |
| 555                                                                                | 1.00  | EXAMEN GLUCOSA          |                           | 2.00            | 0.00      | 2.00         |
| 559                                                                                | 1.00  | EXAMEN UREA             |                           | 2.00            | 0.00      | 2.00         |
| 560                                                                                | 1.00  | EXAMEN CREATININA       |                           | 2.00            | 0.00      | 2.00         |
| 561                                                                                | 1.00  | EXAMEN ACIDO URICO      |                           | 2.00            | 0.00      | 2.00         |
| 562                                                                                | 1.00  | EXAMEN TGO Y TGP        |                           | 5.00            | 0.00      | 5.00         |
| 556                                                                                | 1.00  | EXAMEN COLESTEROL TOTAL |                           | 2.25            | 0.00      | 2.25         |
| 557                                                                                | 1.00  | EXAMEN TRIGLICERIO      |                           | 2.25            | 0.00      | 2.25         |
| 570                                                                                | 1.00  | EXAMEN DE ORINA         |                           | 2.00            | 0.00      | 2.00         |
| 571                                                                                | 1.00  | EXAMEN COPROPARASITARIO |                           | 2.00            | 0.00      | 2.00         |
| 573                                                                                | 1.00  | EXAMEN PYLORY EN HECES  |                           | 7.00            | 0.00      | 7.00         |
| INFORMACION ADICIONAL :                                                            |       |                         | SUBTOTAL 12%              |                 |           | 0.00         |
| BODEGA : PRINCIPAL<br>VENDEDOR:<br>OBSERVACIONES: null<br>TIPO: 1<br>CODIGO: 18615 |       |                         | SUBTOTAL 0%               |                 |           | 34.50        |
|                                                                                    |       |                         | SUBTOTAL NO objeto de IVA |                 |           | 0.00         |
|                                                                                    |       |                         | SUBTOTAL Exento de IVA    |                 |           | 0.00         |
|                                                                                    |       |                         | SUBTOTAL SIN IMPUESTOS    |                 |           | 34.50        |
|                                                                                    |       |                         | TOTAL Descuento           |                 |           | 0.00         |
| Formas de Pago                                                                     |       |                         | Valor                     | Plazo           | U.Tiempo  | ICE          |
| SIN UTILIZACION DEL SISTEMA FINANCIERO                                             |       |                         | 34.50                     |                 |           | 0.00         |
|                                                                                    |       |                         |                           |                 |           | IVA 12%      |
|                                                                                    |       |                         |                           |                 |           | 0.00         |
|                                                                                    |       |                         |                           |                 |           | VALOR TOTAL  |
|                                                                                    |       |                         |                           |                 |           | 34.50        |