



R.U.C.: 1990902034001

**F A C T U R A**

No. : 001-100-000017142

NUMERO DE AUTORIZACION

2101202501199090203400120011000000171420000000610

FECHA Y HORA DE AUTORIZACION

2025-01-21T21:23:46-05:00

AMBIENTE : PRODUCCION

EMISION : NORMAL

CLAVE DE ACCESO



2101202501199090203400120011000000171420000000610

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:

MARIA ANGELINA SOZORANGA MARIZACA

Identificacion: 1900185834

Fecha Emision: 21/01/2025

Guia Remision:

Direccion: SAN MIGUEL

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         |
| 564            | 1.00  | EXAMEN BILIRRUBINA TOTAL              |                   | 2.00            | 0.00      | 2.00         |
| 565            | 1.00  | EXAMEN BILIRRUBINA DIRECTA            |                   | 2.00            | 0.00      | 2.00         |
| 602            | 1.00  | EXAM BILIRRUBINA INDIRECTA            |                   | 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         |
| 599            | 1.00  | EXAMEN LDL HDL                        |                   | 5.00            | 0.00      | 5.00         |
| 557            | 1.00  | EXAMEN TRIGLICERIO                    |                   | 2.25            | 0.00      | 2.25         |
| 570            | 1.00  | EXAMEN DE ORINA                       |                   | 2.00            | 0.00      | 2.00         |
| 1088           | 1.00  | ENVASE PARA MUESTRA DE ORINA 100ML 0% |                   | 0.25            | 0.00      | 0.25         |

**INFORMACION ADICIONAL :**

BODEGA : PRINCIPAL  
VENDEDOR:  
OBSERVACIONES: null  
TIPO: 1  
CODIGO: 18194

|                                  |              |
|----------------------------------|--------------|
| <b>SUBTOTAL 12%</b>              | <b>0.00</b>  |
| <b>SUBTOTAL 0%</b>               | <b>36.75</b> |
| <b>SUBTOTAL NO objeto de IVA</b> | <b>0.00</b>  |
| <b>SUBTOTAL Exento de IVA</b>    | <b>0.00</b>  |
| <b>SUBTOTAL SIN IMPUESTOS</b>    | <b>36.75</b> |
| <b>TOTAL Descuento</b>           | <b>0.00</b>  |
| <b>ICE</b>                       | <b>0.00</b>  |
| <b>IVA 12%</b>                   | <b>0.00</b>  |
| <b>VALOR TOTAL</b>               | <b>36.75</b> |

| Formas de Pago                         | Valor | Plazo | U.Tiempo |
|----------------------------------------|-------|-------|----------|
| SIN UTILIZACION DEL SISTEMA FINANCIERO | 36.75 |       |          |