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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Fecha** | | | | | **Informe N°:** X | | |
| **Día** | **Mes** | | **Año** | |
| xx | xxxx | | xxxx | |
| **Tipo de informe:** | | **Parcial** |  | **Fina**l |  | (Marcar con una X la casilla seleccionada) | | |
| **CONTRATISTA:** | |  | | | | | **CEDULA No.** |  |
| **CONTRATO No.** | |  | | | | | **PERIODO DEL INFORME:** |  |
| **OBJETO:** | |  | | | | | | |
| **ACTIVIDADES GENERALES EJECUTADAS** | | | | | | | | |
|  | | | | | | | | |
| **CONCLUSIONES Y RECOMENDACIONES DEL SUPERVISOR Y/O INTERVENTOR** | | | | | | | | |
|  | | | | | | | | |
| **CONTRATISTA** | | | | | | **FIRMA** | | |
|  | | | | | |  | | |
| **VO.BO. SUPERVISOR** | | | | | | **FIRMA** | | |
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