**Fecha:** xxxxxxxx

Las personas relacionadas a continuación, recibimos de la Universidad de Nariño, un apoyo económico por valor de XXXXXXX con el fin de asistir a xxxxxxxxxxxxxxxxx, discriminado de la siguiente manera:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **No.** | **TIPO DE APOYO** | | | | **NOMBRES Y APELLIDOS** | **CEDULA** | **CODIGO ESTUDIANTIL** | **FIRMA** |
| **AUX. ESTUDIANTIL**  **(VALOR)** | **TRANSPORTE**  **(VALOR)** | **ALIMENTACIÓN**  **(VALOR)** | **HOSPEDAJE**  **(VALOR)** |
| **1** |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |  |  |
| **10** |  |  |  |  |  |  |  |  |
| **11** |  |  |  |  |  |  |  |  |
| **12** |  |  |  |  |  |  |  |  |
| **13** |  |  |  |  |  |  |  |  |
| **14** |  |  |  |  |  |  |  |  |
| **15** |  |  |  |  |  |  |  |  |
| **16** |  |  |  |  |  |  |  |  |
| **17** |  |  |  |  |  |  |  |  |