LISTA DE ASISTENCIA

REUNIÓN DEL CUERPO COLEGIADO

DELEGACIÓN \_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_ DE \_\_\_\_\_\_\_\_\_ DE 202\_

|  |  |  |
| --- | --- | --- |
| No. | NOMBRE Y CARGO | FIRMA |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |
| 9 |  |  |
| 10 |  |  |