

# INSTITUTO ESTATAL PARA LA EDUCACIÓN DE JÓVENES Y ADULTOS

Anexo 2

| SOLICITUD DE VIATICOS                                                                                                                                                                                                           |                  |                                                                                                                                |          |                  |           |                                                         |     |         |     | OFICIO COMISION |   |   |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------------------------------------------------------------------------------------------------|----------|------------------|-----------|---------------------------------------------------------|-----|---------|-----|-----------------|---|---|
| DIRECCIÓN DE: Dirección de Contraloría                                                                                                                                                                                          |                  |                                                                                                                                |          |                  |           |                                                         |     |         |     | 159             |   |   |
|                                                                                                                                                                                                                                 |                  |                                                                                                                                |          |                  |           |                                                         |     |         |     | FECHA           |   |   |
| NOMBRE DEL COMISIONADO                                                                                                                                                                                                          |                  |                                                                                                                                |          |                  |           |                                                         |     |         |     | D               | M | A |
| LIC. RAUL TORRES MARTINEZ                                                                                                                                                                                                       |                  |                                                                                                                                |          |                  |           |                                                         |     |         |     | 06/06/2019      |   |   |
| DATOS DEL CHEQUE                                                                                                                                                                                                                |                  | CANTIDAD \$                                                                                                                    | 3,696.00 |                  | CON LETRA | (TRES MIL SEISCIENTOS NOVENTA Y SEIS PESOS 00/100 M.M.) |     |         |     |                 |   |   |
| DATOS DEL VIAJE                                                                                                                                                                                                                 | VIAJARA A        | C.Z. #13 Mascota, Jalisco y la C.Z. #14 Puerto Vallarta                                                                        |          |                  |           |                                                         |     |         |     |                 |   |   |
|                                                                                                                                                                                                                                 | No. DE DIAS      | 2                                                                                                                              |          | No. DE VIAJEROS  |           |                                                         |     |         |     |                 |   |   |
|                                                                                                                                                                                                                                 | MOTIVO DEL VIAJE | Asistir a Reunión de Balance de la Coordinación de Zona No. 13 Mascota, Jalisco y a la Coordinación de Zona 14 Puerto Vallarta |          |                  |           |                                                         |     |         |     |                 |   |   |
|                                                                                                                                                                                                                                 | LÍNEA AEREA      | BOLETO No.                                                                                                                     | DE       | A                | SALIDA    |                                                         |     | REGRESO |     |                 |   |   |
|                                                                                                                                                                                                                                 |                  |                                                                                                                                |          |                  | No. V.    | DÍA                                                     | HR. | No. V.  | DÍA | HR.             |   |   |
|                                                                                                                                                                                                                                 |                  |                                                                                                                                |          |                  |           |                                                         |     |         |     |                 |   |   |
|                                                                                                                                                                                                                                 |                  |                                                                                                                                |          |                  |           |                                                         |     |         |     |                 |   |   |
|                                                                                                                                                                                                                                 |                  |                                                                                                                                |          |                  |           |                                                         |     |         |     |                 |   |   |
| FACTURA No.                                                                                                                                                                                                                     |                  |                                                                                                                                |          | IMPORTE TOTAL \$ |           |                                                         |     |         |     |                 |   |   |
| GASTOS POR COMPROBAR                                                                                                                                                                                                            |                  |                                                                                                                                |          |                  |           |                                                         |     |         |     |                 |   |   |
| OBSERVACIONES                                                                                                                                                                                                                   |                  |                                                                                                                                |          |                  |           |                                                         |     |         |     |                 |   |   |
| CONSIDERAR VIATICOS PARA EL DIA 11 DE JUNIO DESAYUNO, COMIDA, CENA, HOSPEDAJE Y GASOLINA Y DES. 92.00 COMIDA 16.00 CEN. 12.00 HOSPEDAJE 484.00 DES. 128.00 COM. 202.00 CEN. 128.00 COMBUST. 1,300.00 CASET. 292.00 X 2 = 584.00 |                  |                                                                                                                                |          |                  |           |                                                         |     |         |     |                 |   |   |
| APLICACION CONTABLE                                                                                                                                                                                                             |                  |                                                                                                                                |          |                  |           | SOLICITO                                                |     |         |     |                 |   |   |
| CUENTA                                                                                                                                                                                                                          |                  |                                                                                                                                |          |                  |           | LIC. RAUL TORRES MARTINEZ                               |     |         |     |                 |   |   |
| No. DE DEUDOR                                                                                                                                                                                                                   |                  |                                                                                                                                |          |                  |           | Nombre y Firma                                          |     |         |     |                 |   |   |
| REFERENCIA                                                                                                                                                                                                                      |                  |                                                                                                                                |          |                  |           | AUTORIZO                                                |     |         |     |                 |   |   |
| APLICÓ                                                                                                                                                                                                                          |                  |                                                                                                                                |          |                  |           | LIC. MARCOS GODINEZ MONTES                              |     |         |     |                 |   |   |
| Nombre y Firma                                                                                                                                                                                                                  |                  |                                                                                                                                |          |                  |           | Nombre y Firma Director Area                            |     |         |     |                 |   |   |
| USO EXCLUSIVO                                                                                                                                                                                                                   |                  |                                                                                                                                |          |                  |           | RECIBIDO                                                |     |         |     |                 |   |   |
| INSTITUTO ESTATAL PARA LA EDUCACIÓN DE JÓVENES Y ADULTOS JALISCO                                                                                                                                                                |                  |                                                                                                                                |          |                  |           | CONTABILIDAD                                            |     |         |     |                 |   |   |
| 10 JUN 2019                                                                                                                                                                                                                     |                  |                                                                                                                                |          |                  |           | 19 JUN. 2019                                            |     |         |     |                 |   |   |
| Vo. Bo. Administración                                                                                                                                                                                                          |                  |                                                                                                                                |          |                  |           | Vo. Bo. Tesorería                                       |     |         |     |                 |   |   |

RECIBIDO  
CONTABILIDAD

JALISCO

GOBIERNO DEL ESTADO



FECHA: 06/06/2019

NO. DE OFICIO: 159

**DATOS DEL SERVIDOR PÚBLICO**

NOMBRE: RÁUL TORRES MARTINEZ

PUESTO: DIRECTOR

NIVEL: 22

ADSCRIPCIÓN: DIRECCION DE CONTRALORIA

CLAVE DE LA PLAZA:

Por medio del presente se le hace de su conocimiento, que ha s  
do designado para llevar  
a cabo en la región,

C.Z. # 13 Mascota, Jalisco y la C.Z. #14 Puerto  
Vallarta, Jalisco

durante, 02

días, comenzando 11/06/2019

Y concluyendo 12/06/2019

La Comisión de

Reunión de Balance a la Coordinación de Zona No. 13 Mascota, Jalisco y a la  
Coordinación de Zona No. 14 Puerto Vallarta, Jalisco.

Es por tal motivo que a las autoridades administrativas y personal del Instituto, se les solicita su  
valiosa colaboración y apoyo para que el portador de la presente realice de la manera más adecuada  
las funciones encomendadas en el presente oficio, a nombre del Instituto Estatal para la Educación  
de Jóvenes y Adultos.

La comisión se efectuará a través de:

a) Vehículo Oficial ☒ Vehículo: Vento Placas: NFP-4320

b) Vehículo Propio ☐

c) Camión Urbano ☐

d) Avión ☐

Autoriza la Comisión

  
LIC. MARCOS GODINEZ MONTES  
DIRECTOR GENERAL  
Responsable del Área de Adscripción

INSTITUTO ESTATAL PARA LA EDUCACIÓN DE JÓVENES Y ADULTOS  
RECIBO DE VIATICOS

Anexo 3

OFICIO DE COMISIÓN: 159

FECHA: 14/06/2019

NOMBRE: LIC. RAUL TORRES MARTINEZ

ADSCRIPCIÓN: DIRECCION DE CONTRALORIA

NIVEL: 22

PUESTO: DIRECTOR

No. DE IDENTIFICACIÓN:

RECIBI DEL INSTITUTO ESTATAL PARA LA EDUCACIÓN DE JÓVENES Y ADULTOS LA CANTIDAD DE: \$3,696.00

Asistir a la Reunión de Balance de la Coordinación de Zona No. 13 Mascota, Jalisco y a la Coordinación de Zona No. 14 Puerto Vallarta, Jalisco

DURANTE EL PERIODO DEL

11

AL 12

DE

JUNIO

DEL 2019

Nota: En términos de lo dispuesto por la Secretaría de Hacienda y Crédito Público, el Manual emitido por Instituto Estatal para la Educación de Jóvenes y Adultos, así como el Reglamento Institucional, el importe de los viáticos recibidos, quedan sujetos a comprobación, mediante la documentación que se indica en el artículo Vigésimo Segundo del Manual en cita, obligándome desde estos momento a devolver las cantidades que no sean debidamente comprobadas y/o utilizadas en el desarrollo de la comisión.

RECIBE

Vo.Bo

LIC. RAUL TORRES MARTINEZ  
R.F.C. TOMR - 750314

LIC. MARCOS GODINEZ MONTES

# INSTITUTO ESTATAL PARA LA EDUCACIÓN DE JÓVENES Y ADULTOS INFORME DE COMISIÓN

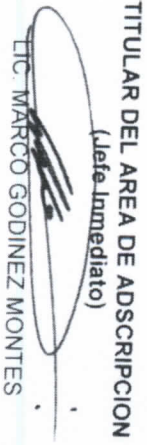
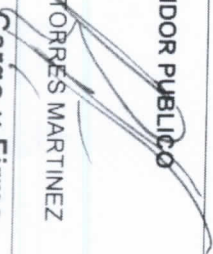
Anexo 5

NOMBRE: LIC. RAUL TORRES MARTINEZ  
ÁREA: DIRECCIÓN DE CONTRALORIA

NO. DE OFICIO DE COMISIÓN: 159

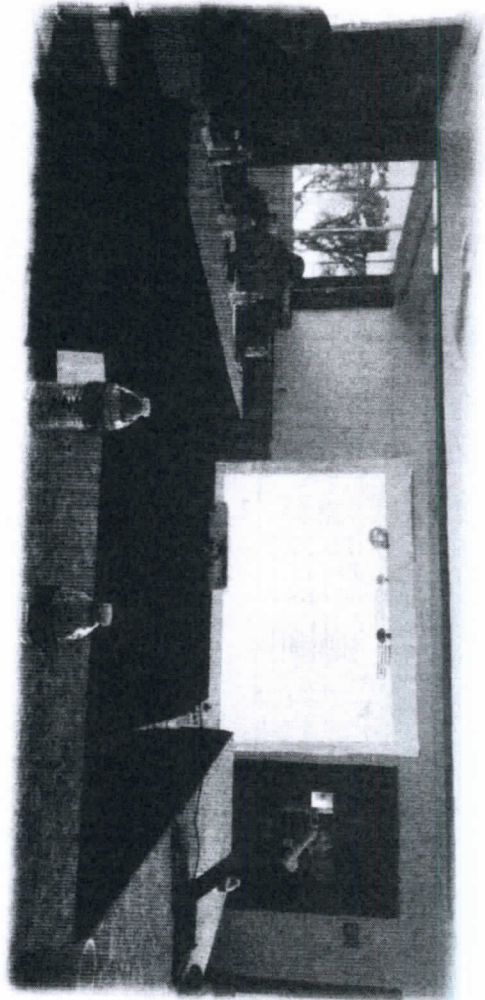
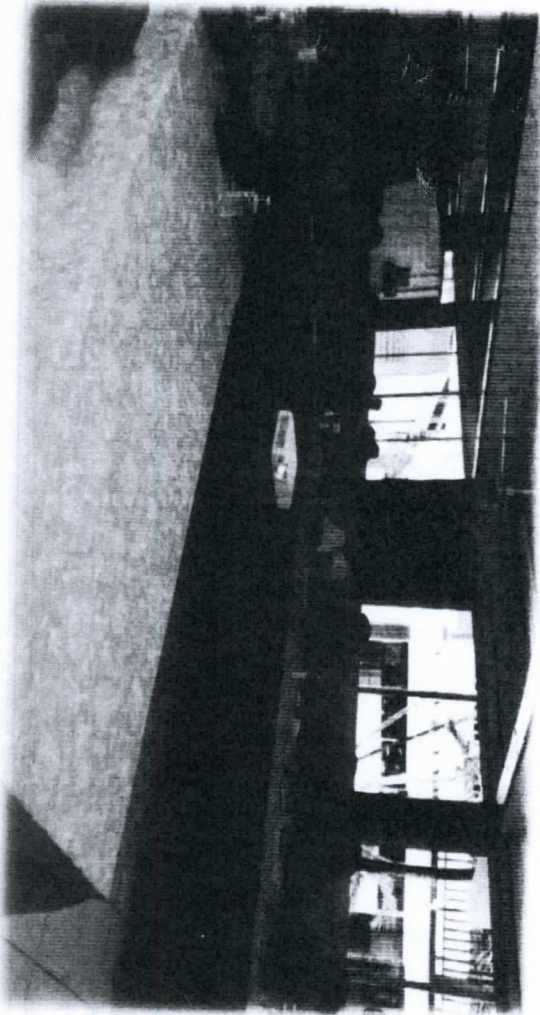
| OBJETIVOS DE LA COMISION | PRINCIPALES ACTIVIDADES REALIZADAS                                                                                                  | EVALUACIONES (RESULTADOS OBTENIDOS) | DOCUMENTACIÓN DE COMPROBANTE                                                                                                                                                                                                                                                                                                                                                  |
|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                          | Se acude a la Junta de Balance mensual de la Coordinación y se interviene en temas concernientes a los procedimientos del Instituto | Verificación y seguimiento de metas | <input type="checkbox"/> Oficio de comisión o designación De participación.<br><input type="checkbox"/> Actas Circunstanciadas.<br><input type="checkbox"/> Diplomas, o constancias de Participación.<br><input type="checkbox"/> Programas de Trabajo.<br><input type="checkbox"/> Informe de la comisión.<br><input checked="" type="checkbox"/> Otros (Datos fotográficos) |

DECLARO BAJO PROTESTA DE DECIR VERDAD, QUE LOS DATOS CONTENIDOS EN ESTE FORMATO, SON LOS SOLICITADOS Y MANIFIESTO TENER CONOCIMIENTO DE LAS SANCIONES QUE SE APLICARIAN EN CASO CONTRARIO.

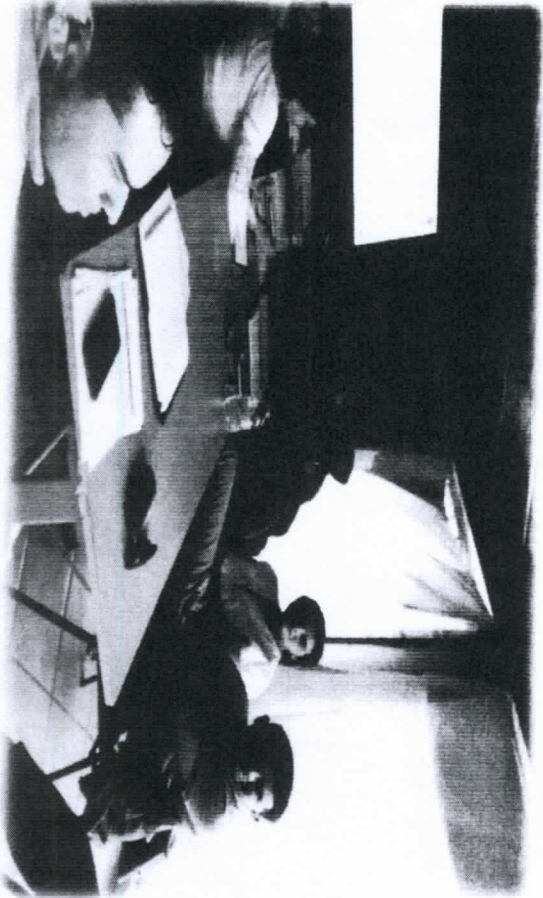
| TITULAR DEL AREA DE ADSCRIPCION<br>(Jefe Inmediato)                                                            | TITULAR DE TESORERIA                                         | SERVIDOR PUBLICO                                                                                                 |
|----------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| <br>LIC. MARCO GODINEZ MONTES | LIC. ANGEL ISRAEL CARRILLO MACIAS                            | <br>LIC. RAUL TORRES MARTINEZ |
| <b>Nombre, Cargo y Firma</b><br>DIA: 14 MES: JUNIO AÑO: 2019                                                   | <b>Nombre, Cargo y Firma</b><br>DIA: 14 MES: JUNIO AÑO: 2019 | <b>Nombre, Cargo y Firma</b><br>DIA: 14 MES: JUNIO AÑO: 2019                                                     |













**MULTISERVICIOS LAS VARAS SA DE CV**  
**MVA120210969**

RÉGIMEN FISCAL: 601 - General de Ley Personas Morales  
LUGAR DE EXPEDICIÓN: 63715  
TIPO DE COMPROBANTE: I - Ingreso

**FACTURA**

**C 12079**

**INEEJAD**  
**IEE010814V7A**

USO CFDI: G03 - Gastos en general

**FECHA**

12/06/2019 18:50:35

**FOLIO FISCAL**

231d2856-39fe-49b8-bc04-a63d203289c7

| CANTIDAD               | UNIDAD         | DESCRIPCIÓN            | PRECIO    | DESCUENTO | IMPORTE    |
|------------------------|----------------|------------------------|-----------|-----------|------------|
| 28.436019              | LITRO<br>(LTR) | MAGNA 32011 (15101506) | \$18.2482 | \$0.00    | \$518.9056 |
| SUBTOTAL               |                |                        |           |           | \$518.91   |
| TRASLADO IVA(16.00%)   |                |                        |           |           | \$81.09    |
| SEISCIENTOS 00/100 MXN |                |                        |           |           |            |
| TOTAL                  |                |                        |           |           | \$600.00   |

**SELLO DIGITAL**

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MÉTODO DE PAGO: PUE - PAGO EN UNA SOLA EXHIBICIÓN  
CONDICIONES DE PAGO:

FORMA DE PAGO: 01 - EFECTIVO



NÚMERO DE CERTIFICADO: 00001000000407750949

FECHA DE CERTIFICACIÓN: 12/06/2019 19:50:36

NÚMERO DE SERIE DEL CERTIFICADO DEL SAT: 00001000000408254801

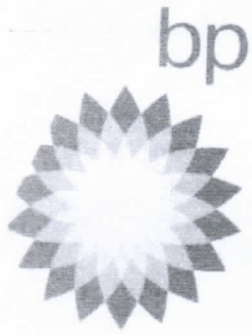
RFC PROVEEDOR DE CERTIFICACIÓN: LSO1306189R5

CADENA ORIGINAL DEL COMPLEMENTO DE CERTIFICACIÓN DIGITAL DEL SAT:

||1.1|231d2856-39fe-49b8-bc04-a63d203289c7|2019-06-12T19:50:36|LSO1306189R5|  
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XC34fVqEhOq6M142Flud1rjQ/nHgIn7CzTfxGPYwNqsU2LueonUxF0zsQrOfPaEwXzIWEpgegoFxrGW8KPWnUV/  
GuN0WrdYfZJHh67qexqR1Shv57qB6GD91NUUnUS0ibMobLctgyQi0EctWGwocnlwX5euEWwURdZPbdjET1M3aSyjbeRCmIJC67tKKJRS  
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**SELLO DEL SAT:**

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MAmv9ruTxOpBe75CWVd8g==

**COMBUSTIBLES TRITON SA DE CV**

BPM871 / RFC CTR030131151  
CARRETERA GDL-TEPIC, No. 9835  
LA VENTA DEL ASTILLERO  
ZAPOCAN, JALISCO  
C.P. 45220, MÉXICO  
TEL/FAX:

**RÉGIMEN FISCAL:**  
601 General de Ley Personas Morales

**FACTURA No.****W 10394****FOLIO FISCAL****d9aca729-a6f8-41d6-a32a-330666e4fb92****LUGAR DE EXPEDICION****45220****FECHA:** 2019-06-17 **HORA:** 12:34:30**USO CFDI:** G03 Gastos en general**CLIENTE:** 500984903

INEEJAD  
Jose Guadalupe Zuno 2091  
Deitz  
Guadalajara  
Guadalajara, Jalisco, México, C.P. 44140

| Cantidad | Unidad de medida | CveProdSer     | Descripción           | Precio Unitario | Importe  |
|----------|------------------|----------------|-----------------------|-----------------|----------|
| 40.5100  | LTR Litro        | 15101506 32025 | BP REGULAR 87 OCTANOS | \$18.018514     | \$729.93 |

Factura s/nota(s) : 209696-0

Sello Digital del CFDI:

PJRCKSJv9X2IEluodwivBz2Q3tHm0K6P7eVxESpbXmdPPGQ5aspRRstoFZNzC9u0Hy/jwkAU/2nFTIf0GRsAoU9pq995kj1P4T3Ili4FZGYi4uTzzgb2SmfkHjIY5T1hjiOUg/leOpcUoA3W4uHAH+WHnifx03pOZj5ImGOeU2E5p51nJn/IX6t9akkW/xFliOBnMPaX36axjZE5VC3nl0zbEuJrRfjkn1RGvY5Dlu9G/r+m4UP2cPGLsizmHbfoz0b4dSuwWiwKFmiRIZXixChdOIE6ZJLGy0HF2O6jJIDMUpt8+bYEso5YCd4m/Pivj5JUx/XhECxLEG3nPflxQ==

Sello del SAT:

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Cadena Original del Complemento de Certificación digital del SAT:

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Facturación Electrónica por Internet

Forma de Pago: 01 Efectivo

Método de Pago: PUE Pago en una sola exhibición

RFC Proveedor de Certificación: EDI101020E99

**SUBTOTAL** \$729.93**I.V.A. 16.00%** \$114.04**TOTAL** \$843.97

Importe en letras:

(Ochocientos cuarenta y tres pesos 97/100 M.N.)



Gracias por visitarnos, lo esperamos pronto



RECEIÇÃO DE PAGAMENTO  
Nº 001/2011  
DATA 10/05/2011  
VALOR R\$ 100,00  
PAGADOR: [illegible]

RECEIÇÃO DE PAGAMENTO  
Nº 002/2011  
DATA 10/05/2011  
VALOR R\$ 100,00  
PAGADOR: [illegible]

RECEIÇÃO DE PAGAMENTO  
Nº 003/2011  
DATA 10/05/2011  
VALOR R\$ 100,00  
PAGADOR: [illegible]

RECEIÇÃO DE PAGAMENTO  
Nº 004/2011  
DATA 10/05/2011  
VALOR R\$ 100,00  
PAGADOR: [illegible]

RECEIÇÃO DE PAGAMENTO  
Nº 005/2011  
DATA 10/05/2011  
VALOR R\$ 100,00  
PAGADOR: [illegible]

RECEIÇÃO DE PAGAMENTO  
Nº 006/2011  
DATA 10/05/2011  
VALOR R\$ 100,00  
PAGADOR: [illegible]



Responda nos dados do cartão Shell



Plaza de Cobro: ARENAL  
Carril/Via: 24 Cobrador: 561E67  
Ticket: 2493040 Folio: 3233722  
Fecha/hora: 2019-06-12 22:11:39  
Categoría: L 0 km/h  
Medio de pago: Efectivo  
Importe IVA Total  
109.48 Pesos 17.52 Pesos 127.00 Pesos



PLAZA DE COBRO: 0053 COMPOSTELA  
12/06/2019 19:30:26  
Folio: 0000196882 CARRIL: 15218  
CLASE : A1 TOTAL: \$38.00  
Facturacion: CXKB DKR9 DMRZ X79I HB



PLAZA DE COBRO: 0053 COMPOSTELA  
12/06/2019 07:46:23  
Folio: 0000151122 CARRIL: 1522A  
CLASE : A1 TOTAL: \$38.00  
Facturacion: D7KR QX89 0ZX0 K299 HB



Plaza de Cobro: BARRANCAS CUERPO B  
Carril/Via: 3 Cobrador: 561315  
Ticket: 21808 Folio: 795081  
Fecha/hora: 2019-06-12 21:38:17  
Categoría: L 0 km/h  
Medio de pago: Efectivo  
Importe IVA Total  
163.79 Pesos 26.21 Pesos 190.00 Pesos

*[Handwritten signature]*

MRO JALA-COMPOSTELA S.A. DE C.V.

FACTURACION ELECTRONICA  
www.autopistajalacompostela.com  
Caseta Amado Nervo

MRO JALA-COMPOSTELA S.A. DE C.V.  
Carril: 2301 Cuerpo: B  
Folio: 00082259  
Secuencial: 00089697  
Fecha: 12/06/2019 Hora: 19:52:48  
Cajero ID: 001012  
Clase: T01A

| Importe  | IVA     | TOTAL    |
|----------|---------|----------|
| \$112.93 | \$18.07 | \$131.00 |

Cualquier queja o sugerencia al Tel. 01 800 953 0535  
GRACIAS POR SU PREFERENCIA, ¡FELIZ VIAJE!

Plaza de Cobro: ARENAL  
Carril/Via: 2 Cobrador: 561232  
Ticket: 1899699 Folio: 2716865  
Fecha/hora: 2019-06-12 07:13:33  
Categoría: L 0 km/h  
Medio de pago: Efectivo  
Importe IVA Total  
109.48 Pesos 17.52 Pesos 127.00 Pesos



FACTURACION ELECTRONICA  
www.autopistajalacompostela.com  
Caseta Amado Nervo

MRO JALA-COMPOSTELA S.A. DE C.V.

Carril: 2104 Cuerpo: A  
Folio: 00358935  
Secuencial: 00381662  
Fecha: 12/06/2019 Hora: 07:22:53  
Cajero ID: 001046  
Clase: T01A

MRO JALA-COMPOSTELA S.A. DE C.V.

| Importe  | IVA     | TOTAL    |
|----------|---------|----------|
| \$112.93 | \$18.07 | \$131.00 |

Cualquier queja o sugerencia al Tel. 01 800 953 0535  
GRACIAS POR SU PREFERENCIA, ¡FELIZ VIAJE!

MRO JALA-COMPOSTELA S.A. DE C.V.

Plaza de Cobro: BARRANCAS CUERPO A  
Carril/Via: 3 Cobrador: 514919  
Ticket: 15653 Folio: 777435  
Fecha/hora: 2019-06-12 07:39:16  
Categoría: L 0 km/h  
Medio de pago: Efectivo  
Importe IVA Total  
163.79 Pesos 26.21 Pesos 190.00 Pesos

RF

# INSTITUTO ESTATAL PARA LA EDUCACIÓN DE JÓVENES Y ADULTOS

## LIQUIDACION DE GASTOS DE VIAJE Y VIATICOS

14-jun-19

OFICIO COMISION

159

MONEDA

NAL SI

EXT

PAIS VISITADO  
NOMBRE MONEDA

NOMBRE DEL COMISIONADO

LIC. RAUL TORRES MARTINEZ

PUESTO

DIRECTOR DE CONTRALORIA INTERNA

MOTIVO DE LA COMISION

Asistir a la Reunión de Balance de la C coordinación de Zona No. 13 Mascota, Jalisco y a la Coordinación de Zona No. 14 Puerto Vallarta, Jalisco

C.Z. # 13 Mascota y C.Z. #14 Puerto Vallarta, Jalisco

COMISIONADO A: (Lugar)

PERIODO (dd/mm/aa al dd/mm/aa)

11/06/2019 AL 12/06/2019

VIATICOS

| DETALLES        |           |           |         | TRANSPORTE |                |          |       |        |       |
|-----------------|-----------|-----------|---------|------------|----------------|----------|-------|--------|-------|
| DIA<br>dd/mm/aa | HOSPEDAJE | ALIMENTOS | PASAJES | GASOLINA   | TRANSPORTACION | PEAJES   | OTROS | I.V.A. | TOTAL |
| 11/06/2019      |           | \$92.00   |         | \$563.70   |                |          |       |        |       |
| 11/06/2019      |           | \$166.00  |         | \$843.97   |                |          |       |        |       |
| 11/06/2019      |           | \$92.00   |         |            |                |          |       |        |       |
| 12/06/2019      |           | \$92.00   |         | \$600.00   |                | \$127.00 |       |        |       |
| 12/06/2019      |           | \$166.00  |         |            |                | \$38.00  |       |        |       |
| 12/06/2019      |           | \$92.00   |         |            |                | \$38.00  |       |        |       |
|                 |           |           |         |            |                | \$190.00 |       |        |       |
|                 |           |           |         |            |                | \$131.00 |       |        |       |
|                 |           |           |         |            |                | \$127.00 |       |        |       |
|                 |           |           |         |            |                | \$131.00 |       |        |       |
|                 |           |           |         |            |                | \$190.00 |       |        |       |
|                 |           |           |         |            |                | \$127.00 |       |        |       |
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