COMPROBACIÓN DE GASTOS

COMISIÓN: ☐ ***NACIONAL*** ***INTERNACIONAL*** x

Nombre del funcionario:	CARLOS S. DE REGULES RUIZ-FUNES
Destino:	GEORGETOWN, GUYANA
Periodo:	30 DE SPTIEMBRE AL 4 DE OCTUBRE
Fecha de Informe de comisión:	5 DE OCTUBRE DE 2018

COMISIÓN FINANCIADA SI X NO ☐

SE ANEXAN LAS SIGUIENTES FACTURAS EN ORIGINAL Y FIRMADAS POR EL INTERESADO, PARA TRÁMITE DE REEMBOLSO Y/O COMPROBACIÓN:

Fecha	No. factura	Concepto	Total en Dólar Guyanes	Total en dolares Americanos
04/10/2018	509	HOSPEDAJE	$254,904.00	$1,185.32
04/10/2018	360	CONSUMO	$22,629.00	$105.23
04/10/2018	1491	CONSUMO		$48.78
30/09/2018	1393	CONSUMO		$30.74
02/10/2018	36	CONSUMO	$11,230.00	$52.22
01/10/2018	S/N	CONSUMO	$12,903.00	$60.00
03/10/2018	S/N	CONSUMO	$13,978.25	$65.00
				$1,547.29

Observaciones:

LOS GASTOS QUE NO POSEEN NÚMERO DE TICKET CORRESPONDEN A CONSUMOS DONDE NO FUE POSIBLE OBTENER UN COMPROBANTE, NO OBSTANTE LO ANTERIOR SE INCLUYEN EN LA RELACIÓN DE GASTOS MENCIONADOS EN EL LINEAMIENTO APLICABLE A COMPROBACIONES INTERNACIONALES

FIRMA DE FUNCIONARIO: ______________________

SECRETARÍA DE MEDIO AMBIENTE Y RECURSOS NATURALES

DIRECCIÓN GENERAL DE ADMINISTRACIÓN Y DE FINANZAS
REGISTRO ÚNICO DE COMISIONES AL PERSONAL CON PAGO DE VIÁTICOS
DETALLE DE COMPROBACIÓN DE GASTOS

SEMARNAT

FOLIO No.	28329
FECHA	06/11/2018

I. COMPROBACIÓN DE VIÁTICOS OTORGADOS

DOCUMENTO	FECHA	TIPO DE COMPROBACIÓN	CONCEPTO	EUROS	TIPO DE CAMBIO	DOLARES	TIPO DE CAMBIO	PESOS
1393	30/09/2018	RGTOS_EXTR	ALIMENTOS	0.00	.0	30.74	19.040	585.29
S/N	01/10/2018	RGTOS_EXTR	ALIMENTOS	0.00	.0	60.00	18.770	1,126.20
36	02/10/2018	RGTOS_EXTR	ALIMENTOS	0.00	.0	52.22	18.990	991.66
S/N	03/10/2018	RGTOS_EXTR	ALIMENTOS	0.00	.0	65.00	18.950	1,231.75
509	04/10/2018	RGTOS_EXTR	HOSPEDAJE	0.00	.0	1,185.33	19.20	22,758.34
1491	04/10/2018	RGTOS_EXTR	ALIMENTOS	0.00	.0	48.78	19.20	936.58
360	04/10/2018	RGTOS_EXTR	ALIMENTOS	0.00	.0	105.22	19.20	2,020.22
			SUMA DEVENGADO	0.00	0.0000	1,547.29	19.0500	29,650.04
			PERDIDA CAMBIARIA	0.00	0	0.00	0	0.00
			TOTAL GASTOS VIÁTICOS	0.00	0.0000	1,547.29	19.0500	29,650.04

II. GASTOS DE PASAJES

TOTAL GASTOS PASAJES	0.00

III. INFORME DE LA COMISIÓN

Visita de Trabajo para exponer el modelo de gestión de riesgo que México ha implementado y operado en el sector hidrocarburos.

IV.OBSERVACIONES A LA COMPROBACIÓN DE GASTOS

V. INFORMACIÓN PRESUPUESTAL DE VIÁTICOS

SERVIDOR PÚBLICO COMISIONADO

ING. CARLOS SALVADOR DE REGULES RUIZ FUNES

DIRECTOR EJECUTIVO

GUEST FOLIO

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MARRIOTT

Room	Name	Rate	Depart	Time	MRWNo:
0509	Sir Deregulesruizfunes Carlos Salvadore	US$ 260	04/10/18		XXXX[redacted]
Type CCVK			Arrive 30/09/18	Time	

Sir Carlos Salvadore Deregulesruizfunes
Adolfo Ruiz Cortines 4209
Ciudad De Mexico 14210
Mexico

Room Clerk — Address — Payment

TAXINVOICE
TIN: 014019081

Folio#:

DATE	REFERENCE	CHARGES	CREDITS	BALANCE DUE
30/09/18	Room Charge	55,900.00		
	0509 Carlos Salvadore Deregulesruizfunes			
01/10/18	Terra Mare Breakfast Food	4,500.00		
	0509 Carlos Salvadore Deregulesruizfunes			
01/10/18	Room Charge	55,900.00		
	0509 Carlos Salvadore Deregulesruizfunes			
02/10/18	Terra Mare Breakfast Food	4,500.00		
	0509 Carlos Salvadore Deregulesruizfunes			
02/10/18	Room Charge	55,900.00		
	0509 Carlos Salvadore Deregulesruizfunes			
03/10/18	Terra Mare Breakfast Food	5,200.00		
	0509 Carlos Salvadore Deregulesruizfunes			
03/10/18	Terra Mare Dinner Food	4,250.00		
	0509 Carlos Salvadore Deregulesruizfunes			
03/10/18	Terra Mare Dinner Beer	1,400.00		
	0509 Carlos Salvadore Deregulesruizfunes			
03/10/18	Room Charge	55,900.00		
	0509 Carlos Salvadore Deregulesruizfunes			
04/10/18	USD American Express		280,167.80	
	0509 Carlos Salvadore Deregulesruizfunes			

Net Amount	*243,450.00 GYD*	*280,167.80 GYD*	*1,132.33 USD*	*1,303.11 USD*
Service Charge	*0.00 GYD*		*0.00 USD*	
V.AT14%	*34,083.00 GYD*		*158.53 USD*	
Gratuities	*2634.80 GYD*		*12.25 USD*	
TOTAL	*280,167.80 GYD*		*1,303.11 USD*	

OUTSTANDING BALANCE 0.00 *GYD*
0.00 *USD*

Your Marriott Rewards Points/Frequent Flyer Miles earned will be credited to your account and will appear on your next statement.

Se testa RFC, del servidor publico, persona fisica, con fundamento en lo señalado en el artículo 113 de la LFTAIP.

This statement is your only receipt. You have agreed to pay in cash or by approved personal check or to authorize us to charge your credit card for all amounts charged to you. The amount shown in the credits column opposite any credit card entry in the reference column above will be charged to the credit card number set forth above. (The credit card company will bill in the usual manner.) If for any reason the credit card company does not make payment on this account, you will owe us such amount. If you are direct billed, in the event payment is not made within 25 days after checkout, you will owe us interest from the check out date on any unpaid amount at the rate of 1.5% per month (ANNUAL RATE 18%), or the maximum allowed by law, plus the reasonable cost of collection, including attorney fees.

SignatureX ______________________

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CUESTFOLIO

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MARRIOTT

Room	Name	Rate	Depart	Time	MRWNo:
0509	Sir Deregulesruizfunes Carlos Salvadore	US$ 260	04/10/18		XXXX[redacted]
Type OCVK			Arrive 30/09/18	Time	

Sir Carlos Salvadore Deregulesruizfunes
Adolfo Ruiz Cortines 4209
Ciudad De Mexico 14210
Mexico

Room Clerk — Address — Payment

TAXINVOICE
TIN: 014019081

Folio#:

DATE	REFERENCE	CHARGES	CREDITS	BALANCE DUE

Se testa RFC, del servidor publico, persona fisica, con fundamento en lo señalado en el articulo 113 de la LFTAIP.

Cheques should be made under the name of Atlantic Hotel Inc.

This statement is your onlyreceipt. You have agreed to pay in cash orby approved personal checkor toauthorize us tocharge your credit card for all amounts charged to you. The amount shown in the credits column opposite any creditcard entry in the reference column above will be charged to the credit card number set forth above. (The credit card companywill bill in the usual manner.) Iffor any reason the credit card company does not make payment on this account, you will owe us such amount. If you are direct billed, in the event payment is not madewithin 25 days after checkout, you will owe us interest from the checkout date on any unpaid amount at the rate of 1.5% per month (ANNUAL RATE 18%), or the maximum allowed by law plus the reasonable cost of collection, including attorney fees.

SignatureX ____________________

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