| **ANEXO 11**    **INFORME FINANCIERO FINAL**    **Título del proyecto:**  **Género:**  **Proceso beneficiado:**  **Responsable beneficiario(a):**  **Nº Cuenta bancaria del proyecto:**  **Nombre del banco:**  **Fecha del reporte:**   | **Nº Cuenta/ SubCuenta** (del presupuesto) | **Nº Pago** | **Fecha de Pago** | **Beneficiario (a)** | **Concepto**  *(debe coincidir con su presupuesto)* | **TOTAL**  **PRESUPUESTADO** | **EJERCIDO** | **SIN EJERCER** | **VARIACIONES Y JUSTIFICACIONES** | | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | 1 |  |  |  |  |  |  |  | |  | 2 |  |  |  |  |  |  |  | |  | 3 |  |  |  |  |  |  |  | |  | 4 |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |  | MONTO OTORGADO AÑO FISCAL | $ - | 100,00% |  |  |  | |  |  |  | TOTAL EJERCIDO | $ - |  |  |  |  | |  |  |  | NO EJERCIDO | $ - |  |  |  |  |   **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Nombre y firma de la persona física o moral beneficiaria**  dd/mm/aa | | | | | | | | | |
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