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| Proyecto: |  |
| Entidad:  |  |

| Nº Justif. | Mensualidad | Trabajador | Liquidado nómina | Subtotal s.s. | S.Social | Subtotal I.R.P.F. | I.R.P.F. | Total |
|------------|-------------|------------|------------------|---------------|----------|-------------------|----------|-------|
|            |             |            |                  |               |          |                   |          |       |
|            |             |            |                  |               |          |                   |          |       |
|            |             |            | Subtotal :       |               |          |                   |          |       |
|            |             |            |                  |               |          |                   |          |       |
|            |             |            |                  |               |          |                   |          |       |
|            |             |            | Subtotal :       |               |          |                   |          |       |
|            |             |            |                  |               |          |                   |          |       |
|            |             |            |                  |               |          |                   |          |       |
|            |             |            | Subtotal :       |               |          | Subtotal .        |          |       |
|            |             |            |                  |               |          |                   |          |       |
|            |             |            |                  |               |          |                   |          |       |
|            |             |            | Subtotal :       |               |          | Subtotal .        |          |       |
|            |             |            |                  |               |          |                   |          |       |
|            |             |            |                  |               |          |                   |          |       |
|            |             |            |                  |               |          |                   |          |       |
|            |             |            |                  |               |          |                   |          |       |
|            |             |            |                  |               |          |                   |          |       |
|            |             |            |                  |               |          |                   |          |       |
|            |             |            |                  |               |          |                   |          |       |
|            |             |            | TOTALES:         |               |          |                   |          |       |

Sello y firma del representante de la Entidad.

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