



**ASOCIACION PROFESIONALES  
DE LA SALUD DE CAMPANA**

CASTELLI 112 - TELEFAX: (02499) 427521/424096  
(2804) CAMPANA - BS. AS.

Liquidación N° :118161

Matrícula :551039/00

Prestador : **BRUTTI MARIEL**

N° Insc. I.B.:27-31890999 D.G.I.:27-31890999-2

Fecha:28/11/2025

Hoja N° : 1

### PRESTACIONES

| OBRA SOCIAL                                    | FACT.  | F.P.    | HONORARIOS | GASTOS    | FACTURADO         |
|--|--------|---------|------------|-----------|-------------------|
| 094/OSMATA                                     | 005785 | 09/25   | 98,533.92  |           | 98,533.92         |
| 154/O.S. PERS.INDUST                           | 005815 | 09/25   | 9,781.93   |           | 9,781.93          |
| 163/COBERTURA INT.DE                           | 005875 | 09/25   | 25,140.36  | 3,931.10  | 29,071.46         |
| 164/COBERT INT DE ME                           | 005876 | 09/25   | 63,462.38  | 3,931.10  | 67,393.48         |
| 169/PREVENCION SALUD                           | 001133 | 08/25   | 195,667.97 | 50,092.64 | 245,760.61        |
| 169/PREVENCION SALUD                           | 001133 | 09/25   | 23,066.01  |           | 23,066.01         |
| 180/SALUD PROFESIONA                           | 005786 | 08/25   | 39,141.22  |           | 39,141.22         |
| 180/SALUD PROFESIONA                           | 005786 | 09/25   | 19,989.95  |           | 19,989.95         |
| 196/OMINT S.A.                                 | 001127 | 09/25   | 21,331.00  |           | 21,331.00         |
| 428/ASOCIACION MUTUA                           | 005822 | 08/25   | 22,357.41  |           | 22,357.41         |
| 454/O.S.DEL PERSONAL                           | 005728 | 07/25   | 17,608.39  |           | 17,608.39         |
| <b>A) Total Facturas</b>                       | ---    | ---     | 536,080.54 | 57,954.84 | 594,035.38        |
| <b>B) Total Créditos</b>                       | ---    | ---     | 0.00       | 0.00      | 0.00              |
| 428/ASOCIACION MUTUA                           | 005822 | 10/25 D | -22,357.41 |           | * 1 -22,357.41    |
| 154/O.S. PERS.INDUST                           | 005815 | 09/25 D | -48.94     |           | -48.94            |
| <b>C) Total Débitos</b>                        | ---    | ---     | -22,406.35 | 0.00      | -22,406.35        |
| <b>Total Facturado</b>                         | ---    | ---     | 513,674.19 | 57,954.84 | <b>571,629.03</b> |
| DEBITOS/CREDITOS VARIOS Y RET. LEGALES         |        |         |            | DEBITO    | CREDITO           |
| CAJA DE PREV. Y SEGURO MEDICO                  |        |         |            | 25,683.71 |                   |
| RET.GASTOS ADMINISTRAT. ....                   |        |         |            | 28,581.45 |                   |
| LEY BANCARIA 25413                             |        |         |            | 10,088.59 |                   |
| OTROS BANCOS                                   |        |         |            | 1,000.00  |                   |
| DSI  |        |         |            | 4,500.00  |                   |
| GASTOS PAPELERIA                               |        |         |            | 2,000.00  |                   |
| <b>D) TOTAL DEBITOS/CREDITOS Y RETENCIONES</b> |        |         |            | 71,853.75 | 0.00              |

FECHA DE ENTREGA DE HONORARIOS: EL DIA 10 DE C/MES (INAMOVIBLE)  
SI COINCIDE FIN DE SEMANA O FERIADO PASA AL 1° DIA HABIL POSTERIOR.-

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LOS DEBITOS SE CONTESTAN A PARTIR DEL 15 DE C/MES. Enviar reclamos al mail  
Continua en la próxima hoja



C.P.S.M.

COMPROBANTE DE RETENCIONES

NRO.: 118161

| AGENTE DE<br>RETENCION | NUMERO<br>ASOC. PROF. DE LA SALUD CAMPANA | AP. Y NOMBRE O RAZON SOCIAL<br>DATOS DE LA<br>OPERACION | Nº LIQUIDACION | FECHA      | IMPORTE    |
|------------------------|---|---|----------------|------------|------------|
|                        | 30-65576850-1                             |   | 00118161       | 28/11/2025 | 513,674.19 |

| DATOS DEL<br>DEPOSITO | FECHA | NRO. DE COMPROBANTE | IMPORTE RETENIDO |
|-----------------------|-------|---------------------|------------------|
|                       | / /   | 00118161            | 25,683.71        |

| CONTRIBUYENTE | MATRICULA     | CUIT          | APELLIDO Y NOMBRE O RAZON SOCIAL |
|---------------|---------------|---------------|----------------------------------|
|               | 551039        | 27-31890999-2 | BRUTTI MARIEL                    |
|               | DOMICILIO     |               | LOCALIDAD-PARTIDO                |
|               | SARMIENTO 154 |               | CAMPANA                          |

OBSERVACIONES

DR. ROMANO PEDRO  
PRESIDENTE

28/11/2025

FECHA ASOC. DE PROF. DE LA SALUD

## Detalle de Prestaciones Liquidadas, Fecha: 28/11/2025

Prestador : 551039/00 BRUTTI MARIEL

| Obra Social               | FACT.       | Fecha      | N.N.    | Cant | Afiliado        | HONORARIOS | GASTOS    | FACTURADO  |
|---------------------------|-------------|------------|---------|------|-----------------|------------|-----------|------------|
| 094-OSMATA                | 0003-005785 | 01/09/2025 | 4201010 | 4    |                 | 98,533.92  | 0.00      | 98,533.92  |
| 154-O.S. PERS.INDUST. DEL | 0003-005815 | 01/09/2025 | 4201010 | 1    | ALLENDE LUISANA | 9,781.93   | 0.00      | 9,781.93   |
| 163-COBERTURA INT.DE MED. | 0003-005875 | 01/09/2025 | 1102150 | 1    |                 | 5,042.09   | 1,119.30  | 6,161.39   |
| 163-COBERTURA INT.DE MED. | 0003-005875 | 01/09/2025 | 2201010 | 1    |                 | 937.26     | 2,811.80  | 3,749.06   |
| 163-COBERTURA INT.DE MED. | 0003-005875 | 01/09/2025 | 4201010 | 1    |                 | 19,161.01  | 0.00      | 19,161.01  |
| 164-COBERT INT DE MED ASI | 0003-005876 | 01/09/2025 | 1102150 | 1    |                 | 5,042.09   | 1,119.30  | 6,161.39   |
| 164-COBERT INT DE MED ASI | 0003-005876 | 01/09/2025 | 2201010 | 1    |                 | 937.26     | 2,811.80  | 3,749.06   |
| 164-COBERT INT DE MED ASI | 0003-005876 | 01/09/2025 | 4201010 | 3    |                 | 57,483.03  | 0.00      | 57,483.03  |
| 169-PREVENCIÓN SALUD S.A. | 0004-001133 | 01/08/2025 | 1102150 | 2    |                 | 72,499.28  | 41,481.44 | 113,980.72 |
| 169-PREVENCIÓN SALUD S.A. | 0004-001133 | 01/08/2025 | 2201010 | 2    |                 | 9,206.19   | 8,611.20  | 17,817.39  |
| 169-PREVENCIÓN SALUD S.A. | 0004-001133 | 01/08/2025 | 4201010 | 5    |                 | 113,962.50 | 0.00      | 113,962.50 |
| 169-PREVENCIÓN SALUD S.A. | 0004-001133 | 01/09/2025 | 4201010 | 1    |                 | 23,066.01  | 0.00      | 23,066.01  |
| 180-SALUD PROFESIONAL Y T | 0003-005786 | 01/08/2025 | 4201010 | 2    |                 | 39,141.22  | 0.00      | 39,141.22  |
| 180-SALUD PROFESIONAL Y T | 0003-005786 | 01/09/2025 | 4201010 | 1    |                 | 19,989.95  | 0.00      | 19,989.95  |
| 196-OMINT S.A.            | 0004-001127 | 01/09/2025 | 4201010 | 1    | TORCHOI PAOLA   | 21,331.00  | 0.00      | 21,331.00  |
| 428-ASOCIACION MUTUAL SAN | 0003-005822 | 01/08/2025 | 4201010 | 1    |                 | 22,357.41  | 0.00      | 22,357.41  |
| 454-O.S.DEL PERSONAL MARI | 0003-005728 | 01/07/2025 | 4201010 | 1    |                 | 17,608.39  | 0.00      | 17,608.39  |
| Total                     |             |            |         |      |                 | 536,080.54 | 57,954.84 | 594,035.38 |