



**ASOCIACION PROFESIONALES  
DE LA SALUD DE CAMPANA**

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

Liquidación N° :110860

Fecha:31/10/2024

Matrícula :553876/00

Hoja N° : 1

Prestador : **CEDEÑO MENDOZA LEOMAR**

N° Insc. I.B.:20-96075721 D.G.I.:20-96075721-2

### PRESTACIONES

| OBRA SOCIAL              | FACT.  | F.P.    | HONORARIOS | GASTOS   | FACTURADO         |
|--------------------------|--------|---------|------------|----------|-------------------|
| 024/MEDIFE ASOCIACIO     | 000919 | 07/24   | 13,533.11  | 1,208.52 | 14,741.63         |
| 024/MEDIFE ASOCIACIO     | 000919 | 08/24   | 12,428.44  |          | 12,428.44         |
| 038/O.S.UNION PERSON     | 000925 | 07/24   | 8,679.02   |          | 8,679.02          |
| 073/ASOC.DEL PERS.SU     | 004910 | 07/24   | 18,677.80  |          | 18,677.80         |
| 094/OSMATA               | 004979 | 06/24   | 172,368.00 |          | 172,368.00        |
| 094/OSMATA               | 004979 | 07/24   | 49,464.00  |          | 49,464.00         |
| 097/O.S.P.E.D. Y C.      | 004940 | 06/24   | 8,334.91   |          | 8,334.91          |
| 124/OSPECON              | 004954 | 06/24   | 11,232.64  |          | 11,232.64         |
| 124/OSPECON              | 004954 | 07/24   | 5,616.32   |          | 5,616.32          |
| 149/FUND.SERV.SOC.TE     | 004907 | 07/24   | 18,677.80  |          | 18,677.80         |
| 154/O.S. PERS.INDUST     | 004991 | 08/24   | 6,300.00   |          | 6,300.00          |
| 164/COBERT INT DE ME     | 005028 | 08/24   | 94,390.78  | 3,748.60 | 98,139.38         |
| 180/SALUD PROFESIONA     | 005003 | 07/24   | 31,305.36  |          | 31,305.36         |
| 180/SALUD PROFESIONA     | 005003 | 08/24   | 52,175.60  |          | 52,175.60         |
| 181/OSPE (RED OMIP S     | 005004 | 08/24   | 1,409.40   | 1,703.88 | 3,113.28          |
| 283/OBRA SOCIAL PAST     | 004983 | 08/24   | 13,590.51  |          | 13,590.51         |
| 428/ASOCIACION MUTUA     | 004977 | 07/24   | 33,918.20  |          | 33,918.20         |
| 546/ISALUD               | 004981 | 08/24   | 12,148.00  |          | 12,148.00         |
| 709/CLINICA DELTA S.     | 004953 | 07/24   | 8,000.00   |          | 8,000.00          |
| <b>A) Total Facturas</b> | ---    | ---     | 572,249.89 | 6,661.00 | 578,910.89        |
| <b>B) Total Créditos</b> | ---    | ---     | 0.00       | 0.00     | 0.00              |
| 073/ASOC.DEL PERS.SU     | 004910 | 07/24 D | -371.69    |          | -371.69           |
| 097/O.S.P.E.D. Y C.      | 004940 | 06/24 D | -166.70    |          | -166.70           |
| 124/OSPECON              | 004954 | 06/24 D | -335.29    |          | -335.29           |
| 154/O.S. PERS.INDUST     | 004991 | 08/24 D | -126.00    |          | -126.00           |
| 283/OBRA SOCIAL PAST     | 004983 | 08/24 D | -258.22    |          | -258.22           |
| 164/COBERT INT DE ME     | 005028 | 10/25 D | -3,006.90  |          | * 1 -3,006.90     |
| <b>C) Total Débitos</b>  | ---    | ---     | -4,264.80  | 0.00     | -4,264.80         |
| <b>Total Facturado</b>   | ---    | ---     | 567,985.09 | 6,661.00 | <b>574,646.09</b> |

DEBITOS/CREDITOS VARIOS Y RET. LEGALES

DEBITO

CREDITO

INGRESOS BRUTOS

10,056.31

CAJA DE PREV. Y SEGURO MEDICO

28,399.25



**ASOCIACION PROFESIONALES  
DE LA SALUD DE CAMPANA**  
CASTELLI 112 - TELEFAX: (02499) 427521/424096  
(2804) CAMPANA - BS. AS.

Liquidación N° :110860

Fecha:31/10/2024

Matrícula :553876/00

Hoja N° : 2

Prestador : **CEDEÑO MENDOZA LEOMAR**

N° Insc. I.B.:20-96075721 D.G.I.:20-96075721-2

| DEBITOS/CREDITOS VARIOS Y RET. LEGALES         | DEBITO           | CREDITO     |
|--|------------------|-------------|
| LEY BANCARIA 25413                             | 7,389.50         |             |
| RET.GASTOS ADM. ....                           | 45,971.69        |             |
| DSI  | 4,000.00         |             |
| GASTOS PAPELERIA                               | 2,000.00         |             |
| <b>D) TOTAL DEBITOS/CREDITOS Y RETENCIONES</b> | <b>97,816.75</b> | <b>0.00</b> |

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  
contaduria@asocprof.com.ar

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FECHA DE ENTREGA DE LIQUIDACION: LUNES A JUEVES 14.00 HS A 16.30 HS.  
VIERNES 13.30 HS A 15.30 HS.  
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\* 1 PTE. VERON TERESA AF. PLAN MASTER SE DEBITA DIFERENCIA DE ARANCEL

**Neto a Pagar**

**476,829.34**

Son \$ cuatrocientos setenta y seis mil ochocientos veintinueve con 34/Cien.

DGR

R-122 - COMPROBANTE DE RETENCIONES

NRO.: 0000097809

| AGENTE DE RETENCION | NUMERO                         | AP. Y NOMBRE O RAZON SOCIAL | DATOS DE LA OPERACION | N° LIQUIDACION | FECHA      | IMPORTE    |
|---------------------|--------------------------------|-----------------------------|-----------------------|----------------|------------|------------|
|                     | 014-90-0001-1<br>30-65576850-1 | ASOC. PROF. DE LA SALUD C   |                       | 00110860       | 31/10/2024 | 574,646.09 |

| DATOS DEL DEPOSITO | FECHA | NRO. DE COMPROBANTE | NOMBRE DEL BANCO     | IMPORTE RETENIDO |
|--------------------|-------|---------------------|----------------------|------------------|
|                    | / /   |                     | PROVINCIA DE BS. AS. | 10,056.31        |

| CONTRIBUYENTE | NUMERO ING. BRUTOS | CUIT          | APELLIDO Y NOMBRE O RAZON SOCIAL |
|---------------|--------------------|---------------|----------------------------------|
|               | 20-96075721-2      | 20-96075721-2 | CEDEÑO MENDOZA LEOMAR            |

  

| DOMICILIO                 | OTRAS REFERENCIAS | LOCALIDAD-PARTIDO |
|---------------------------|-------------------|-------------------|
| capilla del señor 425 1 7 |                   | CAMPANA           |

OBSERVACIONES

DR. ROMANO PEDRO  
PRESIDENTE

31/10/2024

FECHA ASOC. DE PROF. DE LA SALUD

C.P.S.M.

COMPROBANTE DE RETENCIONES

NRO.: 110860

| AGENTE DE RETENCION | NUMERO ASOC. PROF. DE LA SALUD | AP. Y NOMBRE O RAZON SOCIAL CAMPANA | DATOS DE LA OPERACION | Nº LIQUIDACION | FECHA      | IMPORTE    |
|---------------------|--------------------------------|-------------------------------------|-----------------------|----------------|------------|------------|
|                     | 30-65576850-1                  |                                     |                       | 00110860       | 31/10/2024 | 567,985.09 |

| DATOS DEL DEPOSITO | FECHA | NRO. DE COMPROBANTE | IMPORTE RETENIDO |
|--------------------|-------|---------------------|------------------|
|                    | / /   | 00110860            | 28,399.25        |

| CONTRIBUYENTE | MATRICULA                 | CUIT          | APELLIDO Y NOMBRE O RAZON SOCIAL |
|---------------|---------------------------|---------------|----------------------------------|
|               | 553876                    | 20-96075721-2 | CEDEÑO MENDOZA LEOMAR            |
|               | DOMICILIO                 |               | LOCALIDAD-PARTIDO                |
|               | capilla del señor 425 1 7 |               | CAMPANA                          |

OBSERVACIONES

DR. ROMANO PEDRO  
PRESIDENTE

31/10/2024

FECHA ASOC. DE PROF. DE LA SALUD

## Detalle de Prestaciones Liquidadas, Fecha: 31/10/2024

Prestador : 553876/00 CEDEÑO MENDOZA LEOMAR

| Obra Social               | FACT.       | Fecha      | N.N.    | Cant | Afiliado          | HONORARIOS | GASTOS   | FACTURADO  |
|---------------------------|-------------|------------|---------|------|-------------------|------------|----------|------------|
| 024-MEDIFE ASOCIACION CIV | 0004-000919 | 01/07/2024 | 2201010 | 1    |                   | 1,582.69   | 1,208.52 | 2,791.21   |
| 024-MEDIFE ASOCIACION CIV | 0004-000919 | 01/07/2024 | 4250160 | 1    |                   | 11,950.42  | 0.00     | 11,950.42  |
| 024-MEDIFE ASOCIACION CIV | 0004-000919 | 01/08/2024 | 4250160 | 1    |                   | 12,428.44  | 0.00     | 12,428.44  |
| 038-O.S.UNION PERSONAL DE | 0004-000925 | 01/07/2024 | 4201010 | 1    |                   | 8,679.02   | 0.00     | 8,679.02   |
| 073-ASOC.DEL PERS.SUP.DE  | 0003-004910 | 01/07/2024 | 4201010 | 1    | 00250400012 02/07 | 18,677.80  | 0.00     | 18,677.80  |
| 094-OSMATA                | 0003-004979 | 01/06/2024 | 1104030 | 1    | GAJO FLORENCIA    | 172,368.00 | 0.00     | 172,368.00 |
| 094-OSMATA                | 0003-004979 | 01/07/2024 | 1104030 | 1    | BERON NORALI      | 34,020.00  | 0.00     | 34,020.00  |
| 094-OSMATA                | 0003-004979 | 01/07/2024 | 4201010 | 1    |                   | 15,444.00  | 0.00     | 15,444.00  |
| 097-O.S.P.E.D. Y C.       | 0003-004940 | 01/06/2024 | 4201010 | 1    |                   | 8,334.91   | 0.00     | 8,334.91   |
| 124-OSPECON               | 0003-004954 | 01/06/2024 | 4201010 | 2    |                   | 11,232.64  | 0.00     | 11,232.64  |
| 124-OSPECON               | 0003-004954 | 01/07/2024 | 4201010 | 1    |                   | 5,616.32   | 0.00     | 5,616.32   |
| 149-FUND.SERV.SOC.TECHINT | 0003-004907 | 01/07/2024 | 4201010 | 1    | 00097790128 04/07 | 18,677.80  | 0.00     | 18,677.80  |
| 154-O.S. PERS.INDUST. DEL | 0003-004991 | 01/08/2024 | 4201010 | 1    |                   | 6,300.00   | 0.00     | 6,300.00   |
| 164-COBERT INT DE MED ASI | 0003-005028 | 01/08/2024 | 1104030 | 1    | SOTELO KAREN      | 12,141.26  | 0.00     | 12,141.26  |
| 164-COBERT INT DE MED ASI | 0003-005028 | 01/08/2024 | 2201010 | 2    |                   | 1,249.52   | 3,748.60 | 4,998.12   |
| 164-COBERT INT DE MED ASI | 0003-005028 | 01/08/2024 | 4201010 | 9    |                   | 81,000.00  | 0.00     | 81,000.00  |
| 180-SALUD PROFESIONAL Y T | 0003-005003 | 01/07/2024 | 4201010 | 3    |                   | 31,305.36  | 0.00     | 31,305.36  |
| 180-SALUD PROFESIONAL Y T | 0003-005003 | 01/08/2024 | 4201010 | 5    |                   | 52,175.60  | 0.00     | 52,175.60  |
| 181-OSPE (RED OMIP SA)    | 0003-005004 | 01/08/2024 | 2201010 | 1    |                   | 1,409.40   | 1,703.88 | 3,113.28   |
| 283-OBRA SOCIAL PASTELERO | 0003-004983 | 01/08/2024 | 4201010 | 1    |                   | 13,590.51  | 0.00     | 13,590.51  |
| 428-ASOCIACION MUTUAL SAN | 0003-004977 | 01/07/2024 | 4201010 | 2    |                   | 33,918.20  | 0.00     | 33,918.20  |
| 546-ISALUD                | 0003-004981 | 01/08/2024 | 4201010 | 1    |                   | 12,148.00  | 0.00     | 12,148.00  |
| 709-CLINICA DELTA S.A. RE | 0003-004953 | 01/07/2024 | 4201010 | 1    |                   | 8,000.00   | 0.00     | 8,000.00   |
| Total                     |             |            |         |      |                   | 572,249.89 | 6,661.00 | 578,910.89 |