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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **RECIBO OFICIAL DE PAGO DE IMPUESTO PREDIAL UNIFICADO** | | | | | | | | | | | | | | |  | |
| **DATOS GENERALES DEL OBLIGADO** | | | | | | | | | | | | | | | | |
| Número de identificación Tributaria  41486920 | | | Apellidos y Nombres del Contribuyente (o Razón Social para Personas Jurídicas)  ROSA MARIA CALDERON LESMES | | | | | | | | | | | | | |
| Numero Predial Nacional | | | 0100000004060019000000000 | | | | | Referencia Catastral Número | | | | | 010004060019000 | | | |
| Año Gravable  2017, 2018, 2019, 2023, 2022, 2021, 2020, 2024 | | No. Formulario de abono a cancelar | | | Fecha del Formulario | | | | | | | Fecha de Pago | | | | |
| AÑO  2024 | | | | MES  4 | DIA  10 | | AÑO  2024 | | MES  4 | | DIA  10 |
| No. Factura Abono  010090320240410085642000 | | Fecha de factura abono | | AÑO | MES | DIA |  | | | |  | | | | | |
| 2024 | 4 | 10 |  | | | |  | | | | | |
| **PAGOS** | | | | | | | | | | | | | | | | |
| Impuesto | | | | | | | $421.511 | | | | | | | | | |
| Interés | | | | | | | $378.489 | | | | | | | | | |
| Sobretasa | | | | | | | $0 | | | | | | | | | |
| Sobretasa Bomberil | | | | | | | $0 | | | | | | | | | |
| Interés Sobretasa Bomberil | | | | | | | $0 | | | | | | | | | |
| Otros | | | | | | | $0 | | | | | | | | | |
| Interés de Plazo | | | | | | | $0 | | | | | | | | | |
| **PAGO TOTAL** | | | | | | | $800.000 | | | | | | | | | |
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| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **FIRMA DE REPRESENTANTE LEGAL O PROPIETARIO** | | | | | | | | | | | | | | | | |
| Nombre | ROSA MARIA CALDERON LESMES | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | | |
| C.C. No. | 41486920 | | | | | | | | | | | | | | | |