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| **NOMBRE DE UNIDAD RESPONSABLE: ­­­­­­­­­­** |  |  |  |  |  |  |  |  |  |  |  |  |  | **ISAPEG** |
|  **TITULAR DE LA U.R.:** |  |  |  |  |  |  |  |  |  |  |  |  |  | **2017** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Dirección/ área  | Área / Gemba | ENE | FEB | MAR  | ABR  | MAY  | JUN | JUL | AGO | SEP | OCT | NOV | DIC  | Evaluador | firma  |
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\_\_\_\_\_\_­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Gto.; a \_\_\_\_ de \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ de 2017.