

| DESCRIPCIÓN                                                            | CANT<br>MÁX x MES | TOTAL<br>(CANT x MES) |
|------------------------------------------------------------------------|-------------------|-----------------------|
| 1. PERSONAL                                                            |                   |                       |
| 2. REQUERIMIENTOS PERSONAL (Gastos Médicos, EMO's, SCTR, Gastos SSOMA) |                   |                       |
| 3. TRANSPORTE DE PERSONAL                                              |                   |                       |