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| **Fecha:** |  | **Evaluación correspondiente al:** | |
| **Nombre de la persona que revisa:** |  |  | 1er Trimestre |
| **Nombre del enlace:** |  |  | 2do Trimestre |
| **Área administrativa:** |  |  | 3er Trimestre |
|  | 4to. Trimestre |

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| **Descripción del bien informático** | **Numero de inventario** | **Evaluación del bien** | | | **Observaciones** |
| **Bueno** | **Regular** | **Malo** |
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| **Bueno** | No necesita mantenimiento |
| **Regular** | Agendar reparación remitiendose a mantenimiento preventivo |
| **Malo** | Se remite a revisión y se determina si es mantenimiento preventivo y/o correctivo |

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| **ELABORÓ** | **REVISÓ** |
| Enlace | Jefe del Departamento de  Informática |