| **Nombre del receptor** | | | | |  | **CIF 123456789123** | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Dirección | | | | |  |  | | |
| Teléfono | | | | |  | **RECIBO POR HONORARIOS** | | |
|  | | | | |  | 001- | No 00001 | |
|  | | | | | |  |  |  |
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| **Recibí de:** |  | | | | **C.I.F** |  | |  |
| **La suma de:** | (Escribir la cantidad en letras) | | | | | | | |
| **Como Honorarios por concepto de:** | |  | | |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
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| FECHA |  |  |  |  | **Total Honorarios o monto bruto** | |  | |
|  |  |  |  |  |
|  |  |  |  |  | **( %) Retención Impuesto a la Renta - IR** | |  | |
|  |  |  |  |  |
|  | |  |  |  | **Total Neto Recibido (a pagar)** | |  | |
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