

ANIO	MES	NIVEL_ENT	ENTIDAD	DIR	AREA	DEPARTAMENTO	AFILIADOS	ESTADO	REMUNERACION MENSUAL	QUINTO_EST	EXC	PRESP	DEPARTAMENTO	CONCEPTO	MOVIMIENTO	USUARIOS	CARGO	CARGA	DELEGACION	TIPO	AÑO DE INGRESO	OPCION	PROFESION	CORREO ELECTRONICO	FORMA ACTO ADMINISTRATIVO	MOTIVO MOVIMIENTO	FECHA DEL CAMBIO DE CONFIRMA	IDENTIFICADOR DE CONCURSO
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