aportes en línea

Resumen General de Pago

DATOS GENERALES DEL APORTANTE

Identificación	dv	Razon Social	Clase Aportante	Sucursal Principal	Direccion	Ciudad-Departamento	Teléfono	Exonerado SENA e ICBF
NIT 900624704	1	AVANTI IT SAS	D - BENEFICIARIO LEY 1429 DE 2010	PRINCIPAL	CALLE 4 5 45	CALI-VALLE	4856597	Si

DATOS GENERALES DE LA LIQUIDACION

Periodo		Clave		Tipo	Fecha		Pago		
Pensión	Salud	Pago	Planilla	Planilla	Limite	Pago	Banco	Dias Mora	Valor
2023-04	2023-05	2058586645	9450547857	E	2023/05/03	2023/05/03	BANCOLOMBIA	0	$4,218,400

LIQUIDACION DETALLADA DE APORTES

EMPLEADO				PENSION			SALUD				CCF				RIESGOS				PARAFISCALES		
No.	Identificación		Nombres	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Días	IBC	Aporte
Sucursal: PRINCIPAL (5 Afiliados)						$9,100,000	$1,456,000			$9,100,000	$364,000			$9,100,000	$364,000			$9,100,000	$47,700		$0	$0
Centro de Trabajo: PRINCIPAL (5 Afiliados)						$9,100,000	$1,456,000			$9,100,000	$364,000			$9,100,000	$364,000			$9,100,000	$47,700		$0	$0
Ciudad: CALI Depto: VALLE (5 Afiliados)						$9,100,000	$1,456,000			$9,100,000	$364,000			$9,100,000	$364,000			$9,100,000	$47,700		$0	$0
1	CC	1143824330	LAM FRANCISCO	25-14	30	$1,550,000	$248,000	EPS010	30	$1,550,000	$62,000	CCF56	30	$1,550,000	$62,000	14-11	30	$1,550,000	$8,100	30	$0	$0
2	CC	6625327	MILLAN JAMES	230301	30	$3,250,000	$520,000	EPS012	30	$3,250,000	$130,000	CCF56	30	$3,250,000	$130,000	14-11	30	$3,250,000	$17,000	30	$0	$0
3	CC	1151956504	PAYAN JULIAN	25-14	30	$1,250,000	$200,000	EPS012	30	$1,250,000	$50,000	CCF56	30	$1,250,000	$50,000	14-11	30	$1,250,000	$6,600	30	$0	$0
4	CC	31322513	RUIZ LILIAN	230301	30	$1,800,000	$288,000	EPS005	30	$1,800,000	$72,000	CCF56	30	$1,800,000	$72,000	14-11	30	$1,800,000	$9,400	30	$0	$0
5	CC	1112302041	VERA JAIRO	25-14	30	$1,250,000	$200,000	EPS018	30	$1,250,000	$50,000	CCF56	30	$1,250,000	$50,000	14-11	30	$1,250,000	$6,600	30	$0	$0
EMPLEADO				**PENSION**				**SALUD**				**CCF**				**RIESGOS**				**PARAFISCALES**		
No.	Identificación		Nombres	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Días	IBC	Aporte
Sucursal: POPAYAN (5 Afiliados)						$6,400,000	$1,024,000			$6,400,000	$256,000			$6,400,000	$256,000			$6,400,000	$33,800		$0	$0
Centro de Trabajo: SUCURSAL POPAYAN (5 Afiliados)						$6,400,000	$1,024,000			$6,400,000	$256,000			$6,400,000	$256,000			$6,400,000	$33,800		$0	$0
Ciudad: POPAYAN Depto: CAUCA (5 Afiliados)						$6,400,000	$1,024,000			$6,400,000	$256,000			$6,400,000	$256,000			$6,400,000	$33,800		$0	$0
6	CC	1061722524	FREIRE PABLO	230201	30	$1,250,000	$200,000	EPS041	30	$1,250,000	$50,000	CCF14	30	$1,250,000	$50,000	14-11	30	$1,250,000	$6,600	30	$0	$0
7	CC	1002972409	GUZMAN JUAN	25-14	30	$1,250,000	$200,000	EPS005	30	$1,250,000	$50,000	CCF14	30	$1,250,000	$50,000	14-11	30	$1,250,000	$6,600	30	$0	$0
8	CC	1061788047	RUIZ RICARDO	25-14	30	$1,250,000	$200,000	EPS005	30	$1,250,000	$50,000	CCF14	30	$1,250,000	$50,000	14-11	30	$1,250,000	$6,600	30	$0	$0
9	CC	1058968953	SOTELO BEATRIZ	230301	30	$1,400,000	$224,000	ESSC62	30	$1,400,000	$56,000	CCF14	30	$1,400,000	$56,000	14-11	30	$1,400,000	$7,400	30	$0	$0
10	CC	1061722511	TRUJILLO CRISTIAN	230301	30	$1,250,000	$200,000	ESSC62	30	$1,250,000	$50,000	CCF14	30	$1,250,000	$50,000	14-11	30	$1,250,000	$6,600	30	$0	$0
EMPLEADO				**PENSION**				**SALUD**				**CCF**				**RIESGOS**				**PARAFISCALES**		
No.	Identificación		Nombres	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Días	IBC	Aporte
Sucursal: HUILA (1 Afiliados)						$1,700,000	$272,000			$1,700,000	$68,000			$1,700,000	$68,000			$1,700,000	$8,900		$0	$0
Centro de Trabajo: HUILA (1 Afiliados)						$1,700,000	$272,000			$1,700,000	$68,000			$1,700,000	$68,000			$1,700,000	$8,900		$0	$0
Ciudad: SALADOBLANCO Depto: HUILA (1 Afiliados)						$1,700,000	$272,000			$1,700,000	$68,000			$1,700,000	$68,000			$1,700,000	$8,900		$0	$0
11	CC	1061769559	DELGADO JAIRO	230301	30	$1,700,000	$272,000	EPS005	30	$1,700,000	$68,000	CCF32	30	$1,700,000	$68,000	14-11	30	$1,700,000	$8,900	30	$0	$0
Total			**Afiliados(11)**			$17,200,000	$2,752,000			$17,200,000	$688,000			$17,200,000	$688,000			$17,200,000	$90,400		$0	$0

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2023-04	2023-05	2058586645	9450547857	E	2023/05/03	2023/05/03	BANCOLOMBIA	0	$4,218,400

RESUMEN DE PAGO

RIESGO	CODIGO	NIT	DV	AFILIADOS	VALOR LIQUIDADO	INTERESES MORA	SALDOS E INCAPACIDADES	VALOR A PAGAR
AFP (ADMINISTRADORAS: 3)				11	$2,752,000	$0	$0	$2,752,000
COLPENSIONES	25-14	900,336,004	7	5	$1,048,000	$0	$0	$1,048,000
PORVENIR	230301	800,224,808	8	5	$1,504,000	$0	$0	$1,504,000
PROTECCION	230201	800,229,739	0	1	$200,000	$0	$0	$200,000
ARL (ADMINISTRADORAS: 1)				11	$90,400	$0	$0	$90,400
ARL SURA	14-11	890,903,790	5	11	$90,400	$0	$0	$90,400
CCF (ADMINISTRADORAS: 3)				11	$688,000	$0	$0	$688,000
COMFACAUCA	CCF14	891,500,182	0	5	$256,000	$0	$0	$256,000
COMFAMILIAR HUILA	CCF32	891,180,008	2	1	$68,000	$0	$0	$68,000
COMFENALCO VALLE	CCF56	890,303,093	5	5	$364,000	$0	$0	$364,000
EPS (ADMINISTRADORAS: 6)				11	$688,000	$0	$0	$688,000
ASMET SALUD EPS SAS	ESSC62	900,935,126	7	2	$106,000	$0	$0	$106,000
COMFENALCO VALLE	EPS012	890,303,093	5	2	$180,000	$0	$0	$180,000
EPS SURA (ANTES SUSALUD)	EPS010	800,088,702	2	1	$62,000	$0	$0	$62,000
NUEVA EPS MOVILIDAD	EPS041	900,156,264	2	1	$50,000	$0	$0	$50,000
S.O.S. SERVICIO OCCIDENTAL DE SALUD S.A.	EPS018	805,001,157	2	1	$50,000	$0	$0	$50,000
SANITAS	EPS005	800,251,440	6	4	$240,000	$0	$0	$240,000
TOTAL				**11**	**$4,218,400**	**$0**	**$0**	**$4,218,400**