aportes en línea

Planilla Resumen

DATOS GENERALES DE [illegible]TANTE

Identificación	dv	Razon Social	Clase Aportante	Sucursal Principal	Direccion	Ciudad-Departamento	Teléfono	Exonerado SENA e ICBF
NIT 800256897	0	GEICOL SAS	B - MENOS DE 200 COTIZANTES	COMFANDI	CL 37 NTE 3GN 19 BRR PRADOS DEL NORTE	CALI-VALLE	6656005	Si

DATOS GENERALES DE LA LIQUIDACION

Periodo		Clave		Tipo	Fecha		Pago		
Pensión	Salud	Pago	Planilla	Planilla	Limite	Pago	Banco	Dias Mora	Valor
2023-08	2023-09	229891368	9457469913	E	2023/09/22	2023/09/21	BANCO DAVIVIENDA	0	$13,571,000

LIQUIDACION DETALLADA DE APORTES

EMPLEADO				NOVEDADES	PENSION				SALUD				CCF				RIESGOS					PARAFISCALES				
No.	Identificación		Nombre	ingret tde tae tdp tap vsp cor vst sln ige lma vac avp vct irl vip	Codigo	Dias	IBC	Aporte	Codigo	Dias	IBC	Aporte	Codigo	Dias	IBC	Aporte	Codigo	Dias	IBC	Tarifa	Aporte	Dias	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: COMFANDI (6 Afiliados)							$33,401,000	$5,629,000			$33,401,000	$1,336,200			$33,401,000	$1,336,200			$33,401,000		$1,186,300		$0	$0		$9,487,700
Centro de Trabajo: 0,522 (4 Afiliados)							$17,688,000	$2,957,500			$17,688,000	$707,600			$17,688,000	$707,600			$17,688,000		$92,500		$0	$0		$4,465,200
Ciudad: CALI Depto: VALLE (4 Afiliados)							$17,688,000	$2,957,500			$17,688,000	$707,600			$17,688,000	$707,600			$17,688,000		$92,500		$0	$0		$4,465,200
1	CC	29179096	CASTRILLON ORDOÑEZ GLORIA ELIZABETH		25-14	30	$5,500,000	$935,000	EPS005	30	$5,500,000	$220,000	CCF57	30	$5,500,000	$220,000	14-11	30	$5,500,000	0.522%	$28,700	30	$0	$0	SI	$1,403,700
2	CC	66982748	CASTRILLON ORDOÑEZ LILY CECILIA		25-14	30	$7,228,000	$1,228,900	EPS005	30	$7,228,000	$289,200	CCF57	30	$7,228,000	$289,200	14-11	30	$7,228,000	0.522%	$37,800	30	$0	$0	SI	$1,845,100
3	CC	67041113	IZQUIERDO MARQUINEZ NANCY HONEY		23030 1	30	$1,160,000	$185,600	ESSC18	30	$1,160,000	$46,400	CCF57	30	$1,160,000	$46,400	14-11	30	$1,160,000	0.522%	$6,100	30	$0	$0	SI	$284,500
4	CC	76029192	ZUÑIGA VEGA ELMER JAVIER		23030 1	30	$3,800,000	$608,000	EPS018	30	$3,800,000	$152,000	CCF57	30	$3,800,000	$152,000	14-11	30	$3,800,000	0.522%	$19,900	30	$0	$0	SI	$931,900
Centro de Trabajo: 6,960 (2 Afiliados)							$15,713,000	$2,671,500			$15,713,000	$628,600			$15,713,000	$628,600			$15,713,000		$1,093,800		$0	$0		$5,022,500
Ciudad: CALI Depto: VALLE (2 Afiliados)							$15,713,000	$2,671,500			$15,713,000	$628,600			$15,713,000	$628,600			$15,713,000		$1,093,800		$0	$0		$5,022,500
5	CC	34557778	BASTIDAS ALZATE LUZ ADRIANA		25-14	30	$7,825,000	$1,330,400	EPS010	30	$7,825,000	$313,000	CCF57	30	$7,825,000	$313,000	14-11	30	$7,825,000	6.960%	$544,700	30	$0	$0	SI	$2,501,100
6	CC	10546785	CERON Y CERON RODRIGO MAURICIO		23020 1	30	$7,888,000	$1,341,100	EPS010	30	$7,888,000	$315,600	CCF57	30	$7,888,000	$315,600	14-11	30	$7,888,000	6.960%	$549,100	30	$0	$0	SI	$2,521,400

LIQUIDACION DETALLADA DE APORTES

EMPLEADO				NOVEDADES	PENSION				SALUD				CCF				RIESGOS					PARAFISCALES				
No.	Identificación		Nombre	ingret tde tae tdp tap vsp cor vst sln ige lma vac avp vct irl vip	Codigo	Dias	IBC	Aporte	Codigo	Dias	IBC	Aporte	Codigo	Dias	IBC	Aporte	Codigo	Dias	IBC	Tarifa	Aporte	Dias	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: COMFACHOCO (2 Afiliados)							$5,700,000	$912,000			$5,700,000	$228,000			$5,700,000	$228,000			$5,700,000		$396,700		$0	$0		$1,764,700
Centro de Trabajo: COMFACHOCO (2 Afiliados)							$5,700,000	$912,000			$5,700,000	$228,000			$5,700,000	$228,000			$5,700,000		$396,700		$0	$0		$1,764,700
Ciudad: QUIBDO Depto: CHOCO (2 Afiliados)							$5,700,000	$912,000			$5,700,000	$228,000			$45,700,00	$228,000			$45,700,00		$396,700		$0	$0		$1,764,700
7	CC	1077343284	HERNANDEZ MOSQUERA JANNY SAMIRA	X X	23030 1	1	$1,900,000	$304,000	EPS010	1	$1,900,000	$76,000	CCF29	1	$1,900,000	$76,000	14-11	1	$1,900,000	6.960%	$132,200	1	$0	$0	SI	$588,200
8	CC	1010023148	VALDES GARCIA YEFFER YAIR		23020 1	30	$3,800,000	$608,000	CCFC20	30	$3,800,000	$152,000	CCF29	30	$3,800,000	$152,000	14-11	30	$3,800,000	6.960%	$264,500	30	$0	$0	SI	$1,176,500

LIQUIDACION DETALLADA DE APORTES

EMPLEADO				NOVEDADES	PENSION				SALUD				CCF				RIESGOS					PARAFISCALES				
No.	Identificación		Nombre	ingret tde tae tdp tap vsp cor vst sln ige lma vac avp vct irl vip	Codigo	Dias	IBC	Aporte	Codigo	Dias	IBC	Aporte	Codigo	Dias	IBC	Aporte	Codigo	Dias	IBC	Tarifa	Aporte	Dias	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: COMFACAUCA (2 Afiliados)							$3,800,000	$608,000			$5,540,000	$221,600			$5,540,000	$221,600			$5,540,000		$29,000		$0	$0		$1,080,200
Centro de Trabajo: COMFACAUCA (2 Afiliados)							$3,800,000	$608,000			$5,540,000	$221,600			$5,540,000	$221,600			$5,540,000		$29,000		$0	$0		$1,080,200
Ciudad: POPAYAN Depto: CAUCA (2 Afiliados)							$3,800,000	$608,000			$5,540,000	$221,600			$5,540,000	$221,600			$5,540,000		$29,000		$0	$0		$1,080,200
9	CC	31942483	MEDINA GIL GLORIA AMPARO			0	$0	$0	EPS005	30	$1,740,000	$69,600	CCF14	30	$1,740,000	$69,600	14-11	30	$1,740,000	0.522%	$9,100	30	$0	$0	SI	$148,300
10	CC	1061784390	ÑAÑEZ CERON FABIAN ALEJANDRO		23030 1	30	$3,800,000	$608,000	EPS005	30	$3,800,000	$152,000	CCF14	30	$3,800,000	$152,000	14-11	30	$3,800,000	0.522%	$19,900	30	$0	$0	SI	$931,900

LIQUIDACION DETALLADA DE APORTES

EMPLEADO				NOVEDADES	PENSION				SALUD				CCF				RIESGOS					PARAFISCALES				
No.	Identificación		Nombre	ingret tde tae tdp tap vsp cor vst sln ige lma vac avp vct irl vip	Codigo	Dias	IBC	Aporte	Codigo	Dias	IBC	Aporte	Codigo	Dias	IBC	Aporte	Codigo	Dias	IBC	Tarifa	Aporte	Dias	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: COMPENSAR (1 Afiliados)							$4,000,000	$640,000			$4,000,000	$160,000			$4,000,000	$160,000			$4,000,000		$278,400		$0	$0		$1,238,400

Centro de Trabajo: OPER[illegible] (1 Afiliados)			$4,000,000	$640,000			$4,000,000	[illegible],000			$4,000,000	$160,000			$4,000,000		$278,400		$0	$0		$1,238,400
Ciudad: BOGOTA Depto: BOGOTA D.E. (1 Afiliados)			$4,000,000	$640,000			$4,000,000	$160,000			$4,000,000	$160,000			$4,000,000		$278,400		$0	$0		$1,238,400
11 CC 1065656557 PATIÑO CARVAJAL JHANNER	230301	30	$4,000,000	$640,000	EPS008	30	$4,000,000	$160,000	CCF24	30	$4,000,000	$160,000	14-11	30	$4,000,000	6.960%	$278,400	30	$0	$0	SI	$1,238,400
Total Afiliados(11)			$46,901,000	$7,789,000			$48,641,000	$1,945,800			$48,641,000	$1,945,800			$48,641,000		$1,945,800		$0	$0		$13,571,000

DATOS GENERALES DEL APORTANTE

Identificación	dv	Razon Social	Clase Aportante	Sucursal Principal	Direccion	Ciudad-Departamento	Teléfono	Exonerado SENA e ICBF
NIT 800256897	0	GEICOL SAS	B - MENOS DE 200 COTIZANTES	COMFANDI	CL 37 NTE 3GN 19 BRR PRADOS DEL NORTE	CALI-VALLE	6656005	SI

DATOS GENERALES DE LA LIQUIDACION

Periodo		Clave		Tipo	Fecha		Pago		
Pensión	Salud	Pago	Planilla	Planilla	Limite	Pago	Banco	Dias Mora	Valor
2023-08	2023-09	229891368	9457469913	E	2023/09/22	2023/09/21	BANCO DAVIVIENDA	0	$13,571,000

RESUMEN DE PAGO

RIESGO	CODIGO	NIT	DV	AFILIADOS	VALOR LIQUIDADO	INTERESES MORA	SALDOS E INCAPACIDADES	VALOR A PAGAR
AFP (ADMINISTRADORAS: 3)				11	$7,789,000	$0	$0	$7,789,000
COLPENSIONES	25-14	900,336,004	7	5	$4,102,300	$0	$0	$4,102,300
PORVENIR	230301	800,224,808	8	4	$1,737,600	$0	$0	$1,737,600
PROTECCION	230201	800,229,739	0	2	$1,949,100	$0	$0	$1,949,100
ARL (ADMINISTRADORAS: 1)				11	$1,890,400	$0	$0	$1,890,400
ARL SURA	14-11	890,903,790	5	11	$1,890,400	$0	$0	$1,890,400
CCF (ADMINISTRADORAS: 4)				11	$1,945,800	$0	$0	$1,945,800
COMFACAUCA	CCF14	891,500,182	0	2	$221,600	$0	$0	$221,600
COMFACHOCÓ	CCF29	891,600,091	8	2	$228,000	$0	$0	$228,000
COMFANDI	CCF57	890,303,208	5	6	$1,336,200	$0	$0	$1,336,200
COMPENSAR	CCF24	860,066,942	7	1	$160,000	$0	$0	$160,000
EPS (ADMINISTRADORAS: 6)				11	$1,945,800	$0	$0	$1,945,800
COMFACHOCÓ	CCFC20	891,600,091	8	1	$152,000	$0	$0	$152,000
COMPENSAR	EPS008	860,066,942	7	1	$160,000	$0	$0	$160,000
EMSSANAR	ESSC18	901,021,565	8	1	$46,400	$0	$0	$46,400
EPS SURA (ANTES SUSALUD)	EPS010	800,088,702	2	3	$704,600	$0	$0	$704,600
S.O.S. SERVICIO OCCIDENTAL DE SALUD S.A.	EPS018	805,001,157	2	1	$152,000	$0	$0	$152,000
SANITAS	EPS005	800,251,440	6	4	$730,800	$0	$0	$730,800
TOTAL				11	$13,571,000	$0	$0	$13,571,000