aportes en línea

Planilla Resumen

DATOS GENERALES DEL APORTANTE

Identificación	dv	Razon Social	Clase Aportante	Sucursal Principal	Direccion	Ciudad-Departamento	Teléfono	Exonerado SENA e ICBF
NIT 835000815	5	CONCEJO COMUNITARIO DE LA COMUNIDAD DEL CONSEJO DE ANCHICAYA	A - 200 O MAS COTIZANTES	PRINCIPAL	CLL 5 No. 57A 12 BRR CASCAJAL	BUENAVENTURA-VALLE	3166285121	No

DATOS GENERALES DE LA LIQUIDACION

Periodo		Clave		Tipo	Fecha		Pago		
Pensión	Salud	Pago	Planilla	Planilla	Limite	Pago	Banco	Dias Mora	Valor
2024-11	2024-12	1115878793	9478745950	E	2024/12/05	2024/12/10	BANCO DAVIVIENDA	5	$4,022,400

LIQUIDACION DETALLADA DE APORTES

EMPLEADO				NOVEDADES																PENSION				SALUD				CCF				RIESGOS				PARAFISCALES				
No.	Identificación		Nombre	ing	ret	tde	tae	tdp	tap	vsp	cor	vst	sln	ige	lma	vac	avp	vct	irl	vip	Codigo	Días	IBC	Aporte	Codigo	Dias	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Días	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
1	CC	38466120	GAMBOA ISABELINA																		25-14	30	$1,300,000	$208,000	EPS018	30	$1,300,000	$162,500	CCF57	30	$1,300,000	$52,000	14-23	30	$1,300,000	$13,600	30	$1,300,000	$65,000	No	$501,100
2	CC	29262401	GAMBOA NARCILA																		25-14	30	$1,300,000	$208,000	EPS018	30	$1,300,000	$162,500	CCF57	30	$1,300,000	$52,000	14-23	30	$1,300,000	$13,600	30	$1,300,000	$65,000	No	$501,100
3	CC	1028161581	HERNANDEZ ANABELLI																		25-14	30	$1,300,000	$208,000	EPS018	30	$1,300,000	$162,500	CCF57	30	$1,300,000	$52,000	14-23	30	$1,300,000	$13,600	30	$1,300,000	$65,000	No	$501,100
4	CC	1028185121	HERNANDEZ LUZ																		25-14	30	$1,300,000	$208,000	EPS018	30	$1,300,000	$162,500	CCF57	30	$1,300,000	$52,000	14-23	30	$1,300,000	$13,600	30	$1,300,000	$65,000	No	$501,100
5	CC	1028185291	HURTADO JHOANA																		25-14	30	$1,300,000	$208,000	EPS018	30	$1,300,000	$162,500	CCF57	30	$1,300,000	$52,000	14-23	30	$1,300,000	$13,600	30	$1,300,000	$65,000	No	$501,100
6	CC	38473778	RENTERIA NILSA																		25-14	30	$1,300,000	$208,000	EPS018	30	$1,300,000	$162,500	CCF57	30	$1,300,000	$52,000	14-23	30	$1,300,000	$13,600	30	$1,300,000	$65,000	No	$501,100
7	CC	1192754456	RENTERIA TATIANA																		25-14	30	$1,300,000	$208,000	EPS018	30	$1,300,000	$162,500	CCF57	30	$1,300,000	$52,000	14-23	30	$1,300,000	$13,600	30	$1,300,000	$65,000	No	$501,100
8	CC	66938379	VALENZUELA CARMEN																		25-14	30	$1,300,000	$208,000	EPS018	30	$1,300,000	$162,500	CCF57	30	$1,300,000	$52,000	14-23	30	$1,300,000	$13,600	30	$1,300,000	$65,000	No	$501,100
Total	**Afiliados(8)**																						$10,400,000	$1,664,000			$10,400,000	$1,300,000			$10,400,000	$416,000			$10,400,000	$108,800		$10,400,000	$520,000		$4,008,800

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RESUMEN DE PAGO

RIESGO	CODIGO	NIT	DV	AFILIADOS	VALOR LIQUIDADO	INTERESES MORA	SALDOS E INCAPACIDADES	VALOR A PAGAR
AFP (ADMINISTRADORAS: 1)				8	$1,664,000	$5,600	$0	$1,669,600
COLPENSIONES	25-14	900,336,004	7	8	$1,664,000	$5,600	$0	$1,669,600
ARL (ADMINISTRADORAS: 1)				8	$108,800	$400	$0	$109,200
POSITIVA COMPAÑIA DE SEGUROS	14-23	860,011,153	6	8	$108,800	$400	$0	$109,200
CCF (ADMINISTRADORAS: 1)				8	$416,000	$1,400	$0	$417,400
COMFANDI	CCF57	890,303,208	5	8	$416,000	$1,400	$0	$417,400
EPS (ADMINISTRADORAS: 1)				8	$1,300,000	$4,400	$0	$1,304,400
S.O.S. SERVICIO OCCIDENTAL DE SALUD S.A.	EPS018	805,001,157	2	8	$1,300,000	$4,400	$0	$1,304,400
ICBF (ADMINISTRADORAS: 1)				8	$312,000	$1,100	$0	$313,100
INSTITUTO COLOMBIANO DE BIENESTAR FAMILIAR	PAICBF	899,999,239	2	8	$312,000	$1,100	$0	$313,100
SENA (ADMINISTRADORAS: 1)				8	$208,000	$700	$0	$208,700
SENA	PASENA	899,999,034	1	8	$208,000	$700	$0	$208,700
TOTAL				**8**	**$4,008,800**	**$13,600**	**$0**	**$4,022,400**