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 900440998	7	PYMESONLINE S.A.S.	B - MENOS DE 200 COTIZANTES	PYMESONLINE	CRA 23 No 57 - 49	CALI-VALLE	3267691	Si

DATOS GENERALES DE LA LIQUIDACION

Periodo		Clave		Tipo	Fecha		Pago		
Pensión	Salud	Pago	Planilla	Planilla	Limite	Pago	Banco	Dias Mora	Valor
2025-02	2025-03	1361973854	9483414927	E	2025/03/25	2025/03/26	BANCOLOMBIA		$2,464,000

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	Tarifa	Aporte	Días	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
1	CC	1130660235	BENAVIDES LEISSY	X																	230301	27	$1,404,000	$224,700	EPS012	27	$1,404,000	$56,200	CCF57	27	$1,404,000	$56,200	14-11	27	$1,404,000	6.960%	$97,800	27	$0	$0	Si	$434,900
2	CC	1005783412	CASTILLO JOAN	X																	25-14	27	$1,281,150	$205,000	EPS037	27	$1,281,150	$51,300	CCF57	27	$1,281,150	$51,300	14-11	27	$1,281,150	6.960%	$89,200	27	$0	$0	Si	$396,800
3	CC	1193278553	PULIDO JUAN	X																	230301	21	$996,450	$159,500	EPS037	21	$996,450	$39,900	CCF57	21	$996,450	$39,900	14-11	21	$996,450	6.960%	$69,400	21	$0	$0	Si	$308,700
4	CC	6316686	SAAVEDRA BERNARDO																		230301	30	$1,423,500	$227,800	EPS005	30	$1,423,500	$57,000	CCF57	30	$1,423,500	$57,000	14-11	30	$1,423,500	6.960%	$99,100	30	$0	$0	Si	$440,900
5	CC	14650453	SAAVEDRA HECTOR																		231001	30	$1,656,232	$265,000	EPS018	30	$1,656,232	$66,300	CCF57	30	$1,656,232	$66,300	14-11	30	$1,656,232	6.960%	$115,300	30	$0	$0	Si	$512,900
6	CC	29533498	SAAVEDRA LUZ																		25-14	30	$1,500,000	$240,000	EPS018	30	$1,500,000	$60,000	CCF57	30	$1,500,000	$60,000	14-11	30	$1,500,000	0.522%	$7,900	30	$0	$0	Si	$367,900
Total	**Afiliados(6)**																						$8,261,332	$1,322,000			$8,261,332	$330,700			$8,261,332	$330,700			$8,261,332		$478,700		$0	$0		$2,462,100

RESUMEN DE PAGO

RIESGO	CODIGO	NIT	DV	AFILIADOS	VALOR LIQUIDADO
AFP (ADMINISTRADORAS: 3)				6	$1,322,000
COLFONDOS	231001	800,227,940	6	1	$265,000
COLPENSIONES	25-14	900,336,004	7	2	$445,000
PORVENIR	230301	800,224,808	8	3	$612,000
ARL (ADMINISTRADORAS: 1)				6	$478,700
ARL SURA	14-11	890,903,790	5	6	$478,700
CCF (ADMINISTRADORAS: 1)				6	$330,700
COMFANDI	CCF57	890,303,208	5	6	$330,700
EPS (ADMINISTRADORAS: 4)				6	$330,700
COMFENALCO VALLE	EPS012	890,303,093	5	1	$56,200
NUEVA E.P.S.	EPS037	900,156,264	2	2	$91,200
S.O.S. SERVICIO OCCIDENTAL DE SALUD S.A.	EPS018	805,001,157	2	2	$126,300
SANITAS	EPS005	800,251,440	6	1	$57,000
TOTAL				**6**	**$2,462,100**