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 900195307	7	SERVIEXEQUIALES EL RECUERDO SAS	B - MENOS DE 200 COTIZANTES	PRINCIPAL	CARRERA 10 2N-53	POPAYAN-CAUCA	8203131	Si

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 (12 Afiliados)						$17,729,717	$2,837,200			$17,729,717	$709,800			$17,729,717	$709,800			$17,729,717	$381,400		$0	$0
Centro de Trabajo: PRINCIPAL (8 Afiliados)						$11,809,217	$1,889,800			$11,809,217	$472,800			$11,809,217	$472,800			$11,809,217	$123,600		$0	$0
Ciudad: POPAYAN Depto: CAUCA (8 Afiliados)						$11,809,217	$1,889,800			$11,809,217	$472,800			$11,809,217	$472,800			$11,809,217	$123,600		$0	$0
1	CC	34563995	ANGARITA BASTIDAS MONICA LORENA	25-14	30	$1,650,749	$264,200	EPS005	30	$1,650,749	$66,100	CCF14	30	$1,650,749	$66,100	14-23	30	$1,650,749	$17,300	30	$0	$0
2	CC	1061803880	CAMAYO BOLAÑOS YULLI ANDREA	25-14	30	$1,712,368	$274,000	EPS037	30	$1,712,368	$68,500	CCF14	30	$1,712,368	$68,500	14-23	30	$1,712,368	$17,900	30	$0	$0
3	CC	48576269	FERNANDEZ VEGA BIBIANA	230201	30	$1,423,500	$227,800	ESSC62	30	$1,423,500	$57,000	CCF14	30	$1,423,500	$57,000	14-23	30	$1,423,500	$14,900	30	$0	$0
4	CC	1063814868	MELLIZO MOLINA PAOLA ANDREA	230301	28	$1,328,600	$212,600	EPS037	28	$1,328,600	$53,200	CCF14	28	$1,328,600	$53,200	14-23	28	$1,328,600	$13,900	28	$0	$0
5	CC	16715084	MONTILLA ALBERTO	25-14	30	$1,423,500	$227,800	EPS037	30	$1,423,500	$57,000	CCF14	30	$1,423,500	$57,000	14-23	30	$1,423,500	$14,900	30	$0	$0
6	CC	10693390	OROZCO ROJAS WILLIAM	25-14	30	$1,423,500	$227,800	EPS005	30	$1,423,500	$57,000	CCF14	30	$1,423,500	$57,000	14-23	30	$1,423,500	$14,900	30	$0	$0
7	CC	1143955637	ORTIZ HOYOS ANY JULIETH	25-14	30	$1,423,500	$227,800	ESSC62	30	$1,423,500	$57,000	CCF14	30	$1,423,500	$57,000	14-23	30	$1,423,500	$14,900	30	$0	$0
8	CC	25337648	SOL CAMAYO AURELIA	25-14	30	$1,423,500	$227,800	EPS010	30	$1,423,500	$57,000	CCF14	30	$1,423,500	$57,000	14-23	30	$1,423,500	$14,900	30	$0	$0
Centro de Trabajo: RIESGO IV (4 Afiliados)						$5,920,500	$947,400			$5,920,500	$237,000			$5,920,500	$237,000			$5,920,500	$257,800		$0	$0
Ciudad: POPAYAN Depto: CAUCA (4 Afiliados)						$5,920,500	$947,400			$5,920,500	$237,000			$5,920,500	$237,000			$5,920,500	$257,800		$0	$0
9	CC	1083898120	CEBALLOS GARCIA JOSE ANTONIO	230301	30	$1,650,000	$264,000	EPS037	30	$1,650,000	$66,000	CCF14	30	$1,650,000	$66,000	14-23	30	$1,650,000	$71,800	30	$0	$0
10	CC	10181028	DE LOS RIOS ARANGO RODRIGO ALY	230301	30	$1,423,500	$227,800	EPS005	30	$1,423,500	$57,000	CCF14	30	$1,423,500	$57,000	14-23	30	$1,423,500	$62,000	30	$0	$0
11	CC	4612999	HURTADO PEREZ HERNAN MESIAS	230301	30	$1,423,500	$227,800	EPS037	30	$1,423,500	$57,000	CCF14	30	$1,423,500	$57,000	14-23	30	$1,423,500	$62,000	30	$0	$0
12	CC	1002923985	RODRIGUEZ MONTENEGRO SILVIA PATRICIA	25-14	30	$1,423,500	$227,800	EPS005	30	$1,423,500	$57,000	CCF14	30	$1,423,500	$57,000	14-23	30	$1,423,500	$62,000	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: AGENCIA JAMUNDI (1 Afiliados)						$1,423,500	$227,800			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500	$7,500		$0	$0
Centro de Trabajo: SERVIEXEQUIALES AGENCIA JAMUNDI (1 Afiliados)						$1,423,500	$227,800			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500	$7,500		$0	$0
Ciudad: JAMUNDI Depto: VALLE (1 Afiliados)						$1,423,500	$227,800			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500	$7,500		$0	$0
13	CC	15814042	RIVERA LUIS ALBERTO	230301	30	$1,423,500	$227,800	EPS037	30	$1,423,500	$57,000	CCF57	30	$1,423,500	$57,000	14-23	30	$1,423,500	$7,500	30	$0	$0
Total	**Afiliados(13)**					$19,153,217	$3,065,000			$19,153,217	$766,800			$19,153,217	$766,800			$19,153,217	$388,900		$0	$0

aportes en línea

Resumen General de Pago

DATOS GENERALES DE LA LIQUIDACION

Periodo		Clave		Tipo	Fecha		Pago		
Pensión	Salud	Pago	Planilla	Planilla	Limite	Pago	Banco	Dias Mora	Valor
2025-08	2025-09	1749146239	9491374808	E	2025/09/02	2025/09/03	BANCOLOMBIA	1	$4,991,200

RESUMEN DE PAGO

RIESGO	CODIGO	NIT	DV	AFILIADOS	VALOR LIQUIDADO	INTERESES MORA	SALDOS E INCAPACIDADES	VALOR A PAGAR
AFP (ADMINISTRADORAS: 3)				13	$3,065,000	$2,100	$0	$3,067,100
COLPENSIONES	25-14	900,336,004	7	7	$1,677,200	$1,100	$0	$1,678,300
PORVENIR	230301	800,224,808	8	5	$1,160,000	$800	$0	$1,160,800
PROTECCION	230201	800,229,739	0	1	$227,800	$200	$0	$228,000
ARL (ADMINISTRADORAS: 1)				13	$388,900	$300	$0	$389,200
POSITIVA COMPAÑIA DE SEGUROS	14-23	860,011,153	6	13	$388,900	$300	$0	$389,200
CCF (ADMINISTRADORAS: 2)				13	$766,800	$600	$0	$767,400
COMFACAUCA	CCF14	891,500,182	0	12	$709,800	$500	$0	$710,300
COMFANDI	CCF57	890,303,208	5	1	$57,000	$100	$0	$57,100
EPS (ADMINISTRADORAS: 4)				13	$766,800	$700	$0	$767,500
ASMET SALUD EPS SAS	ESSC62	900,935,126	7	2	$114,000	$100	$0	$114,100
EPS SURA (ANTES SUSALUD)	EPS010	800,088,702	2	1	$57,000	$100	$0	$57,100
NUEVA E.P.S.	EPS037	900,156,264	2	6	$358,700	$300	$0	$359,000
SANITAS	EPS005	800,251,440	6	4	$237,100	$200	$0	$237,300
TOTAL				**13**	**$4,987,500**	**$3,700**	**$0**	**$4,991,200**