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 800121752	1	FUNERARIA SANTA CRUZ PLAN ORQUIDEA SAS	B - MENOS DE 200 COTIZANTES	SUCURSAL 9	CRA. 33 No. 17A-35 LA FLORIDA	VILLAVICENCIO-META	3203432413	Si

DATOS GENERALES DE LA LIQUIDACION

Periodo		Clave		Tipo	Fecha		Pago		
Pensión	Salud	Pago	Planilla	Planilla	Limite	Pago	Banco	Dias Mora	Valor
2025-07	2025-08	1749936909	9491450860	E	2025/08/14	2025/09/03	BANCO DE BOGOTA	20	$3,014,400

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	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Tarifa	Aporte	Días	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: SUCURSAL 9 (5 Afiliados)																							$10,492,126	$1,679,100			$10,492,126	$418,100			$10,801,878	$430,500			$10,492,126		$327,000		$0	$0		$2,854,700
Centro de Trabajo: RIESGO 1 (1 Afiliados)																							$1,423,500	$227,900			$1,423,500	$55,100			$1,423,500	$55,100			$1,423,500		$4,800		$0	$0		$342,900
Ciudad: VILLAVICENCIO Depto: META (1 Afiliados)																							$1,423,500	$227,900			$1,423,500	$55,100			$1,423,500	$55,100			$1,423,500		$4,800		$0	$0		$342,900
1	CC	40445546	PINZON MAGDA										X								25-14	1	$47,450	$7,600	EPS017	1	$47,450	$0	CCF34	1	$47,450	$0	14-4	1	$47,450	0.000%	$0	1	$0	$0	Si	$7,600
2	CC	40445546	PINZON MAGDA																		25-14	19	$901,550	$144,300	EPS017	19	$901,550	$36,100	CCF34	19	$901,550	$36,100	14-4	19	$901,550	0.522%	$4,800	19	$0	$0	Si	$221,300
3	CC	40445546	PINZON MAGDA													X					25-14	10	$474,500	$76,000	EPS017	10	$474,500	$19,000	CCF34	10	$474,500	$19,000	14-4	10	$474,500	0.000%	$0	10	$0	$0	Si	$114,000
Centro de Trabajo: RIESGO 3 (1 Afiliados)																							$2,376,663	$380,300			$2,376,663	$95,100			$2,376,663	$95,100			$2,376,663		$57,900		$0	$0		$628,400
Ciudad: VILLAVICENCIO Depto: META (1 Afiliados)																							$2,376,663	$380,300			$2,376,663	$95,100			$2,376,663	$95,100			$2,376,663		$57,900		$0	$0		$628,400
4	CC	7062330	ROMERO GEOBANY									X									25-14	30	$2,376,663	$380,300	EPS037	30	$2,376,663	$95,100	CCF34	30	$2,376,663	$95,100	14-4	30	$2,376,663	2.436%	$57,900	30	$0	$0	Si	$628,400
Centro de Trabajo: RIESGO 4 (3 Afiliados)																							$6,691,963	$1,070,900			$6,691,963	$267,900			$7,001,715	$280,300			$6,691,963		$264,300		$0	$0		$1,883,400
Ciudad: VILLAVICENCIO Depto: META (3 Afiliados)																							$6,691,963	$1,070,900			$6,691,963	$267,900			$7,001,715	$280,300			$6,691,963		$264,300		$0	$0		$1,883,400
5	CC	3080243	GONZALEZ LUIS									X									230201	30	$2,394,260	$383,100	EPS017	30	$2,394,260	$95,800	CCF34	30	$2,394,260	$95,800	14-4	30	$2,394,260	4.350%	$104,200	30	$0	$0	Si	$678,900
6	CC	40185252	MARTINEZ MONICA									X									25-14	30	$2,507,768	$401,300	EPS037	30	$2,507,768	$100,400	CCF34	30	$2,507,768	$100,400	14-4	30	$2,507,768	4.350%	$109,100	30	$0	$0	Si	$711,200
7	CC	1121916253	PARRADO WILMAR													X					230301	12	$619,503	$99,200	EPS002	12	$619,503	$24,800	CCF34	12	$619,503	$24,800	14-4	12	$619,503	0.000%	$0	12	$0	$0	Si	$148,800
8	CC	1121916253	PARRADO WILMAR									X								X	230301	18	$1,170,432	$187,300	EPS002	18	$1,170,432	$46,900	CCF34	18	$1,480,184	$59,300	14-4	18	$1,170,432	4.350%	$51,000	18	$0	$0	Si	$344,500

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	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Tarifa	Aporte	Días	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: COMFACASANARE 1 (1 Afiliados)																							$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
Centro de Trabajo: RIESGO 1 (1 Afiliados)																							$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
Ciudad: VILLANUEVA Depto: CASANARE (1 Afiliados)																							$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
9	CC	4109877	MANRIQUE JAIRO																			0	$0	$0	EPS037	30	$1,423,500	$57,000	CCF69	30	$1,423,500	$57,000	14-4	30	$1,423,500	0.522%	$7,500	30	$0	$0	Si	$121,500
Total Afiliados(6)																							$10,492,126	$1,679,100			$11,915,626	$475,100			$12,225,378	$487,500			$11,915,626		$334,500		$0	$0		$2,976,200

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 800121752	1	FUNERARIA SANTA CRUZ PLAN ORQUIDEA SAS	B - MENOS DE 200 COTIZANTES	SUCURSAL 9	CRA. 33 No. 17A-35 LA FLORIDA	VILLAVICENCIO-META	3203432413	Si

DATOS GENERALES DE LA LIQUIDACION

Periodo		Clave		Tipo	Fecha		Pago		
Pensión	Salud	Pago	Planilla	Planilla	Limite	Pago	Banco	Dias Mora	Valor
2025-07	2025-08	1749936909	9491450860	E	2025/08/14	2025/09/03	BANCO DE BOGOTA	20	$3,014,400

RESUMEN DE PAGO

RIESGO	CODIGO	NIT	DV	AFILIADOS	VALOR LIQUIDADO	INTERESES MORA	SALDOS E INCAPACIDADES	VALOR A PAGAR
AFP (ADMINISTRADORAS: 3)				5	$1,679,100	$21,400	$0	$1,700,500
COLPENSIONES	25-14	900,336,004	7	3	$1,009,500	$12,800	$0	$1,022,300
PORVENIR	230301	800,224,808	8	1	$286,500	$3,700	$0	$290,200
PROTECCION	230201	800,229,739	0	1	$383,100	$4,900	$0	$388,000
ARL (ADMINISTRADORAS: 1)				6	$334,500	$4,300	$0	$338,800
COLPATRIA ARP	14-4	860,002,183	9	6	$334,500	$4,300	$0	$338,800
CCF (ADMINISTRADORAS: 2)				6	$487,500	$6,300	$0	$493,800
COFREM	CCF34	892,000,146	3	5	$430,500	$5,500	$0	$436,000
COMFACASANARE	CCF69	844,003,392	8	1	$57,000	$800	$0	$57,800
EPS (ADMINISTRADORAS: 3)				6	$475,100	$6,200	$0	$481,300
FAMISANAR	EPS017	830,003,564	7	2	$150,900	$2,000	$0	$152,900
NUEVA E.P.S.	EPS037	900,156,264	2	3	$252,500	$3,200	$0	$255,700
SALUD TOTAL	EPS002	800,130,907	4	1	$71,700	$1,000	$0	$72,700
TOTAL				**6**	**$2,976,200**	**$38,200**	**$0**	**$3,014,400**

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 800121752	1	FUNERARIA SANTA CRUZ PLAN ORQUIDEA SAS	B - MENOS DE 200 COTIZANTES	SUCURSAL 9	CRA. 33 No. 17A-35 LA FLORIDA	VILLAVICENCIO-META	3203432413	Si

DATOS GENERALES DE LA LIQUIDACION

Periodo		Clave		Tipo	Fecha		Pago		
Pensión	Salud	Pago	Planilla	Planilla	Limite	Pago	Banco	Dias Mora	Valor
2025-10	2025-11	1951106430	9495242192	E	2025/11/14	2025/11/24	BANCO FINANDINA S.A. BIC	10	$2,288,200

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	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Tarifa	Aporte	Días	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: SUCURSAL 9 (5 Afiliados)																						$8,129,868	$1,301,100			$8,129,868	$325,500			$8,129,868	$325,500			$8,129,868		$199,700		$0	$0		$2,151,800
Centro de Trabajo: RIESGO 1 (1 Afiliados)																						$1,423,500	$227,800			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$349,300
Ciudad: VILLAVICENCIO Depto: META (1 Afiliados)																						$1,423,500	$227,800			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$349,300
1	CC	40445546	PINZON MAGDA																			25-14	30	$1,423,500	$227,800	EPS017	30	$1,423,500	$57,000	CCF34	30	$1,423,500	$57,000	14-4	30	$1,423,500	0.522%	$7,500	30	$0	$0	Si	$349,300
Centro de Trabajo: RIESGO 3 (1 Afiliados)																						$2,000,872	$320,200			$2,000,872	$80,100			$2,000,872	$80,100			$2,000,872		$48,800		$0	$0		$529,200
Ciudad: VILLAVICENCIO Depto: META (1 Afiliados)																						$2,000,872	$320,200			$2,000,872	$80,100			$2,000,872	$80,100			$2,000,872		$48,800		$0	$0		$529,200
2	CC	7062330	ROMERO GEOBANY										X									25-14	30	$2,000,872	$320,200	EPS037	30	$2,000,872	$80,100	CCF34	30	$2,000,872	$80,100	14-4	30	$2,000,872	2.436%	$48,800	30	$0	$0	Si	$529,200
Centro de Trabajo: RIESGO 4 (3 Afiliados)																						$4,705,496	$753,100			$4,705,496	$188,400			$4,705,496	$188,400			$4,705,496		$143,400		$0	$0		$1,273,300
Ciudad: VILLAVICENCIO Depto: META (3 Afiliados)																						$4,705,496	$753,100			$4,705,496	$188,400			$4,705,496	$188,400			$4,705,496		$143,400		$0	$0		$1,273,300
3	CC	3080243	GONZALEZ LUIS										X									230201	11	$801,901	$128,400	EPS017	11	$801,901	$32,100	CCF34	11	$801,901	$32,100	14-4	11	$801,901	4.350%	$34,900	11	$0	$0	Si	$227,500
4	CC	3080243	GONZALEZ LUIS													X						230201	19	$1,410,939	$225,800	EPS017	19	$1,410,939	$56,500	CCF34	19	$1,410,939	$56,500	14-4	19	$1,410,939	0.000%	$0	19	$0	$0	Si	$338,800
5	CC	40185252	MARTINEZ MONICA										X									25-14	30	$2,445,206	$391,300	EPS037	30	$2,445,206	$97,900	CCF34	30	$2,445,206	$97,900	14-4	30	$2,445,206	4.350%	$106,400	30	$0	$0	Si	$693,500
6	CC	1121916253	PARRADO WILMAR		X																	230301	1	$47,450	$7,600	EPS002	1	$47,450	$1,900	CCF34	1	$47,450	$1,900	14-4	1	$47,450	4.350%	$2,100	1	$0	$0	Si	$13,500

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	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Tarifa	Aporte	Días	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: COMFACASANARE 1 (1 Afiliados)																						$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
Centro de Trabajo: RIESGO 1 (1 Afiliados)																						$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
Ciudad: VILLANUEVA Depto: CASANARE (1 Afiliados)																						$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
7	CC	4109877	MANRIQUE JAIRO																				0	$0	$0	EPS037	30	$1,423,500	$57,000	CCF69	30	$1,423,500	$57,000	14-4	30	$1,423,500	0.522%	$7,500	30	$0	$0	Si	$121,500
Total			**Afiliados(6)**																					$8,129,868	$1,301,100			$9,553,368	$382,500			$9,553,368	$382,500			$9,553,368		$207,200		$0	$0		$2,273,300

aportes en línea

Planilla Resumen

RESUMEN DE PAGO

RIESGO	CODIGO	NIT	DV	AFILIADOS	VALOR LIQUIDADO	INTERESES MORA	SALDOS E INCAPACIDADES	VALOR A PAGAR
AFP (ADMINISTRADORAS: 3)				5	$1,301,100	$8,400	$0	$1,309,500
COLPENSIONES	25-14	900,336,004	7	3	$939,300	$6,000	$0	$945,300
PORVENIR	230301	800,224,808	8	1	$7,600	$100	$0	$7,700
PROTECCION	230201	800,229,739	0	1	$354,200	$2,300	$0	$356,500
ARL (ADMINISTRADORAS: 1)				6	$207,200	$1,400	$0	$208,600
COLPATRIA ARP	14-4	860,002,183	9	6	$207,200	$1,400	$0	$208,600
CCF (ADMINISTRADORAS: 2)				6	$382,500	$2,500	$0	$385,000
COFREM	CCF34	892,000,146	3	5	$325,500	$2,100	$0	$327,600
COMFACASANARE	CCF69	844,003,392	8	1	$57,000	$400	$0	$57,400
EPS (ADMINISTRADORAS: 3)				6	$382,500	$2,600	$0	$385,100
FAMISANAR	EPS017	830,003,564	7	2	$145,600	$1,000	$0	$146,600
NUEVA E.P.S.	EPS037	900,156,264	2	3	$235,000	$1,500	$0	$236,500
SALUD TOTAL	EPS002	800,130,907	4	1	$1,900	$100	$0	$2,000
TOTAL				**6**	**$2,273,300**	**$14,900**	**$0**	**$2,288,200**

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 800121752	1	FUNERARIA SANTA CRUZ PLAN ORQUIDEA SAS	B - MENOS DE 200 COTIZANTES	SUCURSAL 9	CRA. 33 No. 17A-35 LA FLORIDA	VILLAVICENCIO-META	3203432413	Si

DATOS GENERALES DE LA LIQUIDACION

Periodo		Clave		Tipo	Fecha		Pago		
Pensión	Salud	Pago	Planilla	Planilla	Limite	Pago	Banco	Dias Mora	Valor
2025-09	2025-10	1899553295	9494316065	E	2025/10/14	2025/11/04	BANCO FINANDINA S.A. BIC	21	$2,944,100

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	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Tarifa	Aporte	Días	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: SUCURSAL 9 (5 Afiliados)																						$10,318,597	$1,651,200			$10,318,597	$413,000			$9,097,865	$364,200			$10,318,597		$356,400		$0	$0		$2,784,800
Centro de Trabajo: RIESGO 1 (1 Afiliados)																						$1,423,500	$227,800			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$349,300
Ciudad: VILLAVICENCIO Depto: META (1 Afiliados)																						$1,423,500	$227,800			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$349,300
1	CC	40445546	PINZON MAGDA																	25-14	30	$1,423,500	$227,800	EPS017	30	$1,423,500	$57,000	CCF34	30	$1,423,500	$57,000	14-4	30	$1,423,500	0.522%	$7,500	30	$0	$0	Si	$349,300
Centro de Trabajo: RIESGO 3 (1 Afiliados)																						$1,998,957	$319,900			$1,998,957	$80,000			$1,998,957	$80,000			$1,998,957		$48,700		$0	$0		$528,600
Ciudad: VILLAVICENCIO Depto: META (1 Afiliados)																						$1,998,957	$319,900			$1,998,957	$80,000			$1,998,957	$80,000			$1,998,957		$48,700		$0	$0		$528,600
2	CC	7062330	ROMERO GEOBANY										X							25-14	30	$1,998,957	$319,900	EPS037	30	$1,998,957	$80,000	CCF34	30	$1,998,957	$80,000	14-4	30	$1,998,957	2.436%	$48,700	30	$0	$0	Si	$528,600
Centro de Trabajo: RIESGO 4 (3 Afiliados)																						$6,896,140	$1,103,500			$6,896,140	$276,000			$5,675,408	$227,200			$6,896,140		$300,200		$0	$0		$1,906,900
Ciudad: VILLAVICENCIO Depto: META (3 Afiliados)																						$6,896,140	$1,103,500			$6,896,140	$276,000			$5,675,408	$227,200			$6,896,140		$300,200		$0	$0		$1,906,900
3	CC	3080243	GONZALEZ LUIS										X							230201	30	$2,644,232	$423,100	EPS017	30	$2,644,232	$105,800	CCF34	30	$1,423,500	$57,000	14-4	30	$2,644,232	4.350%	$115,100	30	$0	$0	Si	$701,000
4	CC	40185252	MARTINEZ MONICA										X							25-14	30	$2,411,556	$385,900	EPS037	30	$2,411,556	$96,500	CCF34	30	$2,411,556	$96,500	14-4	30	$2,411,556	4.350%	$105,000	30	$0	$0	Si	$683,900
5	CC	1121916253	PARRADO WILMAR										X							230301	30	$1,840,352	$294,500	EPS002	30	$1,840,352	$73,700	CCF34	30	$1,840,352	$73,700	14-4	30	$1,840,352	4.350%	$80,100	30	$0	$0	Si	$522,000

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	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Tarifa	Aporte	Días	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: COMFACASANARE 1 (1 Afiliados)																						$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
Centro de Trabajo: RIESGO 1 (1 Afiliados)																						$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
Ciudad: VILLANUEVA Depto: CASANARE (1 Afiliados)																						$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
6	CC	4109877	MANRIQUE JAIRO																		0	$0	$0	EPS037	30	$1,423,500	$57,000	CCF69	30	$1,423,500	$57,000	14-4	30	$1,423,500	0.522%	$7,500	30	$0	$0	Si	$121,500
Total			**Afiliados(6)**																			$10,318,597	$1,651,200			$11,742,097	$470,000			$10,521,365	$421,200			$11,742,097		$363,900		$0	$0		$2,906,300

aportes en línea

Planilla Resumen

RESUMEN DE PAGO

RIESGO	CODIGO	NIT	DV	AFILIADOS	VALOR LIQUIDADO	INTERESES MORA	SALDOS E INCAPACIDADES	VALOR A PAGAR
AFP (ADMINISTRADORAS: 3)				5	$1,651,200	$21,400	$0	$1,672,600
COLPENSIONES	25-14	900,336,004	7	3	$933,600	$12,100	$0	$945,700
PORVENIR	230301	800,224,808	8	1	$294,500	$3,800	$0	$298,300
PROTECCION	230201	800,229,739	0	1	$423,100	$5,500	$0	$428,600
ARL (ADMINISTRADORAS: 1)				6	$363,900	$4,700	$0	$368,600
COLPATRIA ARP	14-4	860,002,183	9	6	$363,900	$4,700	$0	$368,600
CCF (ADMINISTRADORAS: 2)				6	$421,200	$5,500	$0	$426,700
COFREM	CCF34	892,000,146	3	5	$364,200	$4,700	$0	$368,900
COMFACASANARE	CCF69	844,003,392	8	1	$57,000	$800	$0	$57,800
EPS (ADMINISTRADORAS: 3)				6	$470,000	$6,200	$0	$476,200
FAMISANAR	EPS017	830,003,564	7	2	$162,800	$2,100	$0	$164,900
NUEVA E.P.S.	EPS037	900,156,264	2	3	$233,500	$3,100	$0	$236,600
SALUD TOTAL	EPS002	800,130,907	4	1	$73,700	$1,000	$0	$74,700
TOTAL				**6**	**$2,906,300**	**$37,800**	**$0**	**$2,944,100**

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 800121752	1	FUNERARIA SANTA CRUZ PLAN ORQUIDEA SAS	B - MENOS DE 200 COTIZANTES	SUCURSAL 9	CRA. 33 No. 17A-35 LA FLORIDA	VILLAVICENCIO-META	3203432413	Si

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	1822273133	9492876379	E	2025/09/11	2025/10/02	NEQUI	21	$2,925,100

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	Dias	IBC	Tarifa	Aporte	Días	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: SUCURSAL 9 (5 Afiliados)																						$10,105,496	$1,617,100			$10,105,496	$404,400			$10,105,496	$404,400			$10,105,496		$339,300		$0	$0		$2,765,200
Centro de Trabajo: RIESGO 1 (1 Afiliados)																						$1,423,500	$227,800			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$800		$0	$0		$342,600
Ciudad: VILLAVICENCIO Depto: META (1 Afiliados)																						$1,423,500	$227,800			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$800		$0	$0		$342,600
1	CC	40445546	PINZON MAGDA													X					25-14	27	$1,281,150	$205,000	EPS017	27	$1,281,150	$51,300	CCF34	27	$1,281,150	$51,300	14-4	27	$1,281,150	0.000%	$0	27	$0	$0	Si	$307,600
2	CC	40445546	PINZON MAGDA																		25-14	3	$142,350	$22,800	EPS017	3	$142,350	$5,700	CCF34	3	$142,350	$5,700	14-4	3	$142,350	0.522%	$800	3	$0	$0	Si	$35,000
Centro de Trabajo: RIESGO 3 (1 Afiliados)																						$2,057,245	$329,200			$2,057,245	$82,300			$2,057,245	$82,300			$2,057,245		$50,200		$0	$0		$544,000
Ciudad: VILLAVICENCIO Depto: META (1 Afiliados)																						$2,057,245	$329,200			$2,057,245	$82,300			$2,057,245	$82,300			$2,057,245		$50,200		$0	$0		$544,000
3	CC	7062330	ROMERO GEOBANY										X								25-14	30	$2,057,245	$329,200	EPS037	30	$2,057,245	$82,300	CCF34	30	$2,057,245	$82,300	14-4	30	$2,057,245	2.436%	$50,200	30	$0	$0	Si	$544,000
Centro de Trabajo: RIESGO 4 (3 Afiliados)																						$6,624,751	$1,060,100			$6,624,751	$265,100			$6,624,751	$265,100			$6,624,751		$288,300		$0	$0		$1,878,600
Ciudad: VILLAVICENCIO Depto: META (3 Afiliados)																						$6,624,751	$1,060,100			$6,624,751	$265,100			$6,624,751	$265,100			$6,624,751		$288,300		$0	$0		$1,878,600
4	CC	3080243	GONZALEZ LUIS										X								230201	30	$2,302,676	$368,500	EPS017	30	$2,302,676	$92,200	CCF34	30	$2,302,676	$92,200	14-4	30	$2,302,676	4.350%	$100,200	30	$0	$0	Si	$653,100
5	CC	40185252	MARTINEZ MONICA										X								25-14	30	$2,444,691	$391,200	EPS037	30	$2,444,691	$97,800	CCF34	30	$2,444,691	$97,800	14-4	30	$2,444,691	4.350%	$106,400	30	$0	$0	Si	$693,200
6	CC	1121916253	PARRADO WILMAR										X								230301	30	$1,877,384	$300,400	EPS002	30	$1,877,384	$75,100	CCF34	30	$1,877,384	$75,100	14-4	30	$1,877,384	4.350%	$81,700	30	$0	$0	Si	$532,300

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	Dias	IBC	Tarifa	Aporte	Días	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: COMFACASANARE 1 (1 Afiliados)																						$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
Centro de Trabajo: RIESGO 1 (1 Afiliados)																						$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
Ciudad: VILLANUEVA Depto: CASANARE (1 Afiliados)																						$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
7	CC	4109877	MANRIQUE JAIRO																			0	$0	$0	EPS037	30	$1,423,500	$57,000	CCF69	30	$1,423,500	$57,000	14-4	30	$1,423,500	0.522%	$7,500	30	$0	$0	Si	$121,500
Total			**Afiliados(6)**																				$10,105,496	$1,617,100			$11,528,996	$461,400			$11,528,996	$461,400			$11,528,996		$346,800		$0	$0		$2,886,700

aportes en línea

Planilla Resumen

RESUMEN DE PAGO

RIESGO	CODIGO	NIT	DV	AFILIADOS	VALOR LIQUIDADO	INTERESES MORA	SALDOS E INCAPACIDADES	VALOR A PAGAR
AFP (ADMINISTRADORAS: 3)				5	$1,617,100	$21,400	$0	$1,638,500
COLPENSIONES	25-14	900,336,004	7	3	$948,200	$12,500	$0	$960,700
PORVENIR	230301	800,224,808	8	1	$300,400	$4,000	$0	$304,400
PROTECCION	230201	800,229,739	0	1	$368,500	$4,900	$0	$373,400
ARL (ADMINISTRADORAS: 1)				6	$346,800	$4,600	$0	$351,400
COLPATRIA ARP	14-4	860,002,183	9	6	$346,800	$4,600	$0	$351,400
CCF (ADMINISTRADORAS: 2)				6	$461,400	$6,200	$0	$467,600
COFREM	CCF34	892,000,146	3	5	$404,400	$5,400	$0	$409,800
COMFACASANARE	CCF69	844,003,392	8	1	$57,000	$800	$0	$57,800
EPS (ADMINISTRADORAS: 3)				6	$461,400	$6,200	$0	$467,600
FAMISANAR	EPS017	830,003,564	7	2	$149,200	$2,000	$0	$151,200
NUEVA E.P.S.	EPS037	900,156,264	2	3	$237,100	$3,200	$0	$240,300
SALUD TOTAL	EPS002	800,130,907	4	1	$75,100	$1,000	$0	$76,100
TOTAL				**6**	**$2,886,700**	**$38,400**	**$0**	**$2,925,100**

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 800121752	1	FUNERARIA SANTA CRUZ PLAN ORQUIDEA SAS	B - MENOS DE 200 COTIZANTES	SUCURSAL 9	CRA. 33 No. 17A-35 LA FLORIDA	VILLAVICENCIO-META	3203432413	Si

DATOS GENERALES DE LA LIQUIDACION

Periodo		Clave		Tipo	Fecha		Pago		
Pensión	Salud	Pago	Planilla	Planilla	Limite	Pago	Banco	Dias Mora	Valor
2025-06	2025-07	1682894932	9490085234	E	2025/07/11	2025/08/06	BANCO FINANDINA S.A. BIC	26	$6,042,400

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	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Tarifa	Aporte	Días	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: SUCURSAL 9 (11 Afiliados)																							$20,838,606	$3,334,900			$20,838,606	$834,000			$20,459,006	$818,800			$20,838,606		$836,100		$0	$0		$5,823,800
Centro de Trabajo: RIESGO 1 (1 Afiliados)																							$1,423,500	$227,800			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$349,300
Ciudad: VILLAVICENCIO Depto: META (1 Afiliados)																							$1,423,500	$227,800			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$349,300
1	CC	40445546	PINZON MAGDA																		25-14	30	$1,423,500	$227,800	EPS017	30	$1,423,500	$57,000	CCF34	30	$1,423,500	$57,000	14-4	30	$1,423,500	0.522%	$7,500	30	$0	$0	Si	$349,300
Centro de Trabajo: RIESGO 4 (10 Afiliados)																							$19,415,106	$3,107,100			$19,415,106	$777,000			$19,035,506	$761,800			$19,415,106		$828,600		$0	$0		$5,474,500
Ciudad: VILLAVICENCIO Depto: META (10 Afiliados)																							$19,415,106	$3,107,100			$19,415,106	$777,000			$19,035,506	$761,800			$19,415,106		$828,600		$0	$0		$5,474,500
2	CC	1074135205	CRUZ ASTRID											X							230301	8	$379,600	$60,800	EPS017	8	$379,600	$15,200	CCF34	0	$0	$0	14-4	8	$379,600	0.000%	$0	0	$0	$0	Si	$76,000
3	CC	1074135205	CRUZ ASTRID																		230301	22	$1,043,900	$167,100	EPS017	22	$1,043,900	$41,800	CCF34	22	$1,043,900	$41,800	14-4	22	$1,043,900	4.350%	$45,500	22	$0	$0	Si	$296,200
4	CC	17337716	DIAZ EFRAIN									X									231001	30	$2,134,632	$341,600	EPS017	30	$2,134,632	$85,400	CCF34	30	$2,134,632	$85,400	14-4	30	$2,134,632	4.350%	$92,900	30	$0	$0	Si	$605,300
5	CC	3080243	GONZALEZ LUIS									X									230201	30	$2,194,642	$351,200	EPS017	30	$2,194,642	$87,800	CCF34	30	$2,194,642	$87,800	14-4	30	$2,194,642	4.350%	$95,500	30	$0	$0	Si	$622,300
6	CC	1074131567	GUEVARA OSCAR									X									230201	30	$1,807,774	$289,300	EPS017	30	$1,807,774	$72,400	CCF34	30	$1,807,774	$72,400	14-4	30	$1,807,774	4.350%	$78,700	30	$0	$0	Si	$512,800
7	CC	1121895043	HERRERA NESTOR									X									230301	30	$1,701,459	$272,300	EPS017	30	$1,701,459	$68,100	CCF34	30	$1,701,459	$68,100	14-4	30	$1,701,459	4.350%	$74,100	30	$0	$0	Si	$482,600
8	CC	40439918	MALDONADO DIANA									X									25-14	30	$2,331,910	$373,200	EPS017	30	$2,331,910	$93,300	CCF34	30	$2,331,910	$93,300	14-4	30	$2,331,910	4.350%	$101,500	30	$0	$0	Si	$661,300
9	CC	40185252	MARTINEZ MONICA									X									25-14	30	$2,457,192	$393,200	EPS037	30	$2,457,192	$98,300	CCF34	30	$2,457,192	$98,300	14-4	30	$2,457,192	4.350%	$106,900	30	$0	$0	Si	$696,700
10	CC	86012427	PALACIOS EWRING									X									230201	30	$1,991,240	$318,600	EPS017	30	$1,991,240	$79,700	CCF34	30	$1,991,240	$79,700	14-4	30	$1,991,240	4.350%	$86,700	30	$0	$0	Si	$564,700
11	CC	1121916253	PARRADO WILMAR									X									230301	30	$1,788,339	$286,200	EPS002	30	$1,788,339	$71,600	CCF34	30	$1,788,339	$71,600	14-4	30	$1,788,339	4.350%	$77,800	30	$0	$0	Si	$507,200
12	CC	1071632007	ROMERO JERSSON									X									230301	30	$1,584,418	$253,600	EPS017	30	$1,584,418	$63,400	CCF34	30	$1,584,418	$63,400	14-4	30	$1,584,418	4.350%	$69,000	30	$0	$0	Si	$449,400

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	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Tarifa	Aporte	Días	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: COMFACASANARE 1 (1 Afiliados)																							$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
Centro de Trabajo: RIESGO 1 (1 Afiliados)																							$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
Ciudad: VILLANUEVA Depto: CASANARE (1 Afiliados)																							$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
13	CC	4109877	MANRIQUE JAIRO																			0	$0	$0	EPS037	30	$1,423,500	$57,000	CCF69	30	$1,423,500	$57,000	14-4	30	$1,423,500	0.522%	$7,500	30	$0	$0	Si	$121,500
Total			**Afiliados(12)**																				$20,838,606	$3,334,900			$22,262,106	$891,000			$21,882,506	$875,800			$22,262,106		$843,600		$0	$0		$5,945,300

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 800121752	1	FUNERARIA SANTA CRUZ PLAN ORQUIDEA SAS	B - MENOS DE 200 COTIZANTES	SUCURSAL 9	CRA. 33 No. 17A-35 LA FLORIDA	VILLAVICENCIO-META	3203432413	Si

DATOS GENERALES DE LA LIQUIDACION

Periodo		Clave		Tipo	Fecha		Pago		
Pensión	Salud	Pago	Planilla	Planilla	Limite	Pago	Banco	Dias Mora	Valor
2025-06	2025-07	1682894932	9490085234	E	2025/07/11	2025/08/06	BANCO FINANDINA S.A. BIC	26	$6,042,400

RESUMEN DE PAGO

RIESGO	CODIGO	NIT	DV	AFILIADOS	VALOR LIQUIDADO	INTERESES MORA	SALDOS E INCAPACIDADES	VALOR A PAGAR
AFP (ADMINISTRADORAS: 4)				11	$3,334,900	$54,300	$0	$3,389,200
COLFONDOS	231001	800,227,940	6	1	$341,600	$5,600	$0	$347,200
COLPENSIONES	25-14	900,336,004	7	3	$994,200	$16,200	$0	$1,010,400
PORVENIR	230301	800,224,808	8	4	$1,040,000	$16,900	$0	$1,056,900
PROTECCION	230201	800,229,739	0	3	$959,100	$15,600	$0	$974,700
ARL (ADMINISTRADORAS: 1)				12	$843,600	$13,800	$0	$857,400
COLPATRIA ARP	14-4	860,002,183	9	12	$843,600	$13,800	$0	$857,400
CCF (ADMINISTRADORAS: 2)				12	$875,800	$14,400	$0	$890,200
COFREM	CCF34	892,000,146	3	11	$818,800	$13,400	$0	$832,200
COMFACASANARE	CCF69	844,003,392	8	1	$57,000	$1,000	$0	$58,000
EPS (ADMINISTRADORAS: 3)				12	$891,000	$14,600	$0	$905,600
FAMISANAR	EPS017	830,003,564	7	9	$664,100	$10,800	$0	$674,900
NUEVA E.P.S.	EPS037	900,156,264	2	2	$155,300	$2,600	$0	$157,900
SALUD TOTAL	EPS002	800,130,907	4	1	$71,600	$1,200	$0	$72,800
TOTAL				**12**	**$5,945,300**	**$97,100**	**$0**	**$6,042,400**

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 800121752	1	FUNERARIA SANTA CRUZ PLAN ORQUIDEA SAS	B - MENOS DE 200 COTIZANTES	SUCURSAL 9	CRA. 33 No. 17A-35 LA FLORIDA	VILLAVICENCIO-META	3203432413	Si

DATOS GENERALES DE LA LIQUIDACION

Periodo		Clave		Tipo	Fecha		Pago		
Pensión	Salud	Pago	Planilla	Planilla	Limite	Pago	Banco	Dias Mora	Valor
2025-05	2025-06	1537526992	9486619541	E	2025/06/13	2025/06/09	BANCO FINANDINA S.A. BIC	0	$1,332,900

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	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Tarifa	Aporte	Días	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: SUCURSAL 9 (3 Afiliados)																							$4,270,500	$683,400			$4,270,500	$171,000			$4,270,500	$171,000			$4,270,500		$186,000		$0	$0		$1,211,400
Centro de Trabajo: RIESGO 4 (3 Afiliados)																							$4,270,500	$683,400			$4,270,500	$171,000			$4,270,500	$171,000			$4,270,500		$186,000		$0	$0		$1,211,400
Ciudad: VILLAVICENCIO Depto: META (3 Afiliados)																							$4,270,500	$683,400			$4,270,500	$171,000			$4,270,500	$171,000			$4,270,500		$186,000		$0	$0		$1,211,400
1	CC	1074131567	GUEVARA OSCAR																		230201	30	$1,423,500	$227,800	EPS017	30	$1,423,500	$57,000	CCF34	30	$1,423,500	$57,000	14-4	30	$1,423,500	4.350%	$62,000	30	$0	$0	Si	$403,800
2	CC	40185252	MARTINEZ MONICA																		25-14	30	$1,423,500	$227,800	EPS037	30	$1,423,500	$57,000	CCF34	30	$1,423,500	$57,000	14-4	30	$1,423,500	4.350%	$62,000	30	$0	$0	Si	$403,800
3	CC	1121916253	PARRADO WILMAR																		230301	30	$1,423,500	$227,800	EPS002	30	$1,423,500	$57,000	CCF34	30	$1,423,500	$57,000	14-4	30	$1,423,500	4.350%	$62,000	30	$0	$0	Si	$403,800

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	Días	IBC	Aporte	Codigo	Días	IBC	Aporte	Codigo	Días	IBC	Tarifa	Aporte	Días	IBC	Aporte	Exonerado SENA e ICBF	Total Aportes
SUCURSAL: COMFACASANARE 1 (1 Afiliados)																							$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
Centro de Trabajo: RIESGO 1 (1 Afiliados)																							$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
Ciudad: VILLANUEVA Depto: CASANARE (1 Afiliados)																							$0	$0			$1,423,500	$57,000			$1,423,500	$57,000			$1,423,500		$7,500		$0	$0		$121,500
4	CC	4109877	MANRIQUE JAIRO																			0	$0	$0	EPS037	30	$1,423,500	$57,000	CCF69	30	$1,423,500	$57,000	14-4	30	$1,423,500	0.522%	$7,500	30	$0	$0	Si	$121,500
Total			**Afiliados(4)**																				$4,270,500	$683,400			$5,694,000	$228,000			$5,694,000	$228,000			$5,694,000		$193,500		$0	$0		$1,332,900

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 800121752	1	FUNERARIA SANTA CRUZ PLAN ORQUIDEA SAS	B - MENOS DE 200 COTIZANTES	SUCURSAL 9	CRA. 33 No. 17A-35 LA FLORIDA	VILLAVICENCIO-META	3203432413	Si

DATOS GENERALES DE LA LIQUIDACION

Periodo		Clave		Tipo	Fecha		Pago		
Pensión	Salud	Pago	Planilla	Planilla	Limite	Pago	Banco	Dias Mora	Valor
2025-05	2025-06	1537526992	9486619541	E	2025/06/13	2025/06/09	BANCO FINANDINA S.A. BIC	0	$1,332,900

RESUMEN DE PAGO

RIESGO	CODIGO	NIT	DV	AFILIADOS	VALOR LIQUIDADO	INTERESES MORA	SALDOS E INCAPACIDADES	VALOR A PAGAR
AFP (ADMINISTRADORAS: 3)				3	$683,400	$0	$0	$683,400
COLPENSIONES	25-14	900,336,004	7	1	$227,800	$0	$0	$227,800
PORVENIR	230301	800,224,808	8	1	$227,800	$0	$0	$227,800
PROTECCION	230201	800,229,739	0	1	$227,800	$0	$0	$227,800
ARL (ADMINISTRADORAS: 1)				4	$193,500	$0	$0	$193,500
COLPATRIA ARP	14-4	860,002,183	9	4	$193,500	$0	$0	$193,500
CCF (ADMINISTRADORAS: 2)				4	$228,000	$0	$0	$228,000
COFREM	CCF34	892,000,146	3	3	$171,000	$0	$0	$171,000
COMFACASANARE	CCF69	844,003,392	8	1	$57,000	$0	$0	$57,000
EPS (ADMINISTRADORAS: 3)				4	$228,000	$0	$0	$228,000
FAMISANAR	EPS017	830,003,564	7	1	$57,000	$0	$0	$57,000
NUEVA E.P.S.	EPS037	900,156,264	2	2	$114,000	$0	$0	$114,000
SALUD TOTAL	EPS002	800,130,907	4	1	$57,000	$0	$0	$57,000
TOTAL				4	$1,332,900	$0	$0	$1,332,900