

| DATOS GENERALES DEL APORTANTE | | | | | | | | | |
|-------------------------------|----|-------------------------|-----------------|--------------------|----------------|---------------------|----------|-----------------------|--|
| Identificación | dv | Razon Social | Clase Aportante | Sucursal Principal | Dirección | Ciudad-Departamento | Teléfono | Exonerado SENA e ICBF | |
| CC 94062162 | | TAMAYO PANESSO ROBINSON | INDEPENDIENTE | PRINCIPAL | CL 17 #12 - 47 | CANDELARIA-VALLE | 8815784 | No | |

| DATOS GENERALES DE LA LIQUIDACION | | | | | | | | | |
|-----------------------------------|---------|----------|--|------------|----------|------------|------------|--------------------|-----------|
| Periodo | | Clave | | Tipo | Fecha | | Pago | | |
| Pensión | Salud | Pago | | Planilla | Planilla | Limite | Pago | Banco | Valor |
| 2026-04 | 2026-04 | 93007123 | | 9502196280 | I | 2026/05/15 | 2026/04/07 | BANCO DE OCCIDENTE | \$576,900 |

| 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 (1 Afiliados) | | | | | \$1,750,905 | \$280,200 | | | \$1,750,905 | \$218,900 | | | \$1,750,905 | \$35,100 | | | \$1,750,905 | \$42,700 | | \$0 | \$0 | |
| Centro de Trabajo: PRINCIPAL (1 Afiliados) | | | | | \$1,750,905 | \$280,200 | | | \$1,750,905 | \$218,900 | | | \$1,750,905 | \$35,100 | | | \$1,750,905 | \$42,700 | | \$0 | \$0 | |
| Ciudad: CANDELARIA Depto: VALLE (1 Afiliados) | | | | | \$1,750,905 | \$280,200 | | | \$1,750,905 | \$218,900 | | | \$1,750,905 | \$35,100 | | | \$1,750,905 | \$42,700 | | \$0 | \$0 | |
| 1 | CC | 94062162 | TAMAYO ROBINSON | 230301 | 30 | \$1,750,905 | \$280,200 | EPS018 | 30 | \$1,750,905 | \$218,900 | CCF57 | 30 | \$1,750,905 | \$35,100 | 14-25 | 30 | \$1,750,905 | \$42,700 | 30 | \$0 | \$0 |
| Total Afiliados(1) | | | | | \$1,750,905 | \$280,200 | | | \$1,750,905 | \$218,900 | | | \$1,750,905 | \$35,100 | | | \$1,750,905 | \$42,700 | | \$0 | \$0 | |

| DATOS GENERALES DEL APORTANTE | | | | | | | | |
|-------------------------------|----|-------------------------|-----------------|--------------------|----------------|---------------------|----------|-----------------------|
| Identificación | dv | Razon Social | Clase Aportante | Sucursal Principal | Direccion | Ciudad-Departamento | Teléfono | Exonerado SENA e ICBF |
| CC 94062162 | | TAMAYO PANESSO ROBINSON | INDEPENDIENTE | PRINCIPAL | CL 17 #12 - 47 | CANDELARIA-VALLE | 8815784 | No |

| DATOS GENERALES DE LA LIQUIDACION | | | | | | | | | |
|-----------------------------------|---------|----------|------------|----------|------------|------------|--------------------|-----------|-----------|
| Periodo | | Clave | Tipo | Fecha | | Pago | | | |
| Pensión | Salud | Pago | Planilla | Planilla | Limite | Pago | Banco | Dias Mora | Valor |
| 2026-04 | 2026-04 | 93007123 | 9502196280 | I | 2026/05/15 | 2026/04/07 | BANCO DE OCCIDENTE | 0 | \$576,900 |

| RESUMEN DE PAGO | | | | | | | | | |
|--|--------|-------------|----|-----------|------------------|----------------|------------------------|------------------|--|
| RIESGO | CODIGO | NIT | DV | AFILIADOS | VALOR LIQUIDADO | INTERESES MORA | SALDOS E INCAPACIDADES | VALOR A PAGAR | |
| AFP (ADMINISTRADORAS: 1) | | | | 1 | \$280,200 | \$0 | \$0 | \$280,200 | |
| PORVENIR | 230301 | 800,224,808 | 8 | 1 | \$280,200 | \$0 | \$0 | \$280,200 | |
| ARL (ADMINISTRADORAS: 1) | | | | 1 | \$42,700 | \$0 | \$0 | \$42,700 | |
| COLMENA | 14-25 | 800,226,175 | 3 | 1 | \$42,700 | \$0 | \$0 | \$42,700 | |
| CCF (ADMINISTRADORAS: 1) | | | | 1 | \$35,100 | \$0 | \$0 | \$35,100 | |
| COMFANDI | CCF57 | 890,303,208 | 5 | 1 | \$35,100 | \$0 | \$0 | \$35,100 | |
| EPS (ADMINISTRADORAS: 1) | | | | 1 | \$218,900 | \$0 | \$0 | \$218,900 | |
| S.O.S. SERVICIO OCCIDENTAL DE SALUD S.A. | EPS018 | 805,001,157 | 2 | 1 | \$218,900 | \$0 | \$0 | \$218,900 | |
| TOTAL | | | | 1 | \$576,900 | \$0 | \$0 | \$576,900 | |

EFFECTIVO LTDA.
NIT: 830.131.993-1

ORDEN DE SERVICIO

N. OS: 9637456294 DV: 219244
Cliente: 113237 PLANILLAS AVAL Aportes en
Linea Arus Compensar Asopagos Simple Mi
Plan
Fecha: 07/04/2026 12:07:14
PAP: 913227
Nombre: ROBINSON
Apellido 1: TAMAYO
NUM PLANILLA: 9502196280
TIPO DE IDENTIFICACION: CEDULA DE
CIUDADANIA
NUMERO IDENTIFICACION: 94062162
PERIODO: 202604
Referencia: 9502196280 Valor: \$576.900,00

Aplica condiciones particulares con el
cliente beneficiario

Conserve este recibo, es el unico
soporte valido para atender cualquier
reclamacion.

Para reclamaciones presente este
recibo: Tel. (1) 6510101.
servicioalcliente@efecty.com.co.
www.efecty.com.co