

[illegible]

| CÓDIGO       | ADMINISTRADORA | NOMBRE             | No. COTIZANTES | TOTAL APORTES A PENSION |                               |           |             |              | MCPA       |      | MORA      |      | VALOR PAGADO |
|--------------|----------------|--------------------|----------------|-------------------------|-------------------------------|-----------|-------------|--------------|------------|------|-----------|------|--------------|
|              |                |                    |                | COTIZACIÓN              | APORTES VOLUNTARIOS EMPLEADOR | COTIZANTE | SOLIDARIDAD | SUBSISTENCIA | COTIZACIÓN | FSP  | APORTES   | MORA |              |
| 231001       |                | 231001-COL-FORIDOS | 1              | \$ 19,200               | \$ 0                          | \$ 0      | \$ 0        | \$ 0         | \$ 0       | \$ 0 | \$ 19,200 | \$ 0 | \$ 0         |
| 25-14        |                | 25-14 COLPENSIONES | 1              | \$ 19,200               | \$ 0                          | \$ 0      | \$ 0        | \$ 0         | \$ 0       | \$ 0 | \$ 19,200 | \$ 0 | \$ 0         |
| SUB-TOTALES: |                |                    |                |                         |                               |           |             |              |            |      | \$ 38,400 | \$ 0 | \$ 0         |

| ADMINISTRADORA  |                    | TOTAL APORTES A SALUD |                                    |       |               |       |            |      |            |      |         | TOTALS |           |      |              |
|-----------------|--------------------|-----------------------|------------------------------------|-------|---------------|-------|------------|------|------------|------|---------|--------|-----------|------|--------------|
| CÓDIGO          | NOMBRE             | No. COYTENEDORES      | INGENIARÍA POR LICENCIA MATERIEDAD |       | SALUD A FAVOR |       | LICUACIÓN  |      | MORA       |      | APORTES |        | DESCUENTO |      | VALOR PAGADO |
|                 |                    |                       | NÚMERO AUTORIZACIÓN                | VALOR | PLANELA       | VALOR | COTIZACIÓN | UPC  | COTIZACIÓN | UPC  |         |        |           |      |              |
| EP8006          | EP8005-SANTAS S.A. | 1                     | \$ 0                               |       | \$ 0          |       | \$ 0       | \$ 0 | \$ 0       | \$ 0 | \$ 0    | \$ 0   | \$ 0      | \$ 0 | \$ 0         |
| EP8007          | EP8007-NUOVA EPS   | 1                     | \$ 0                               |       | \$ 0          |       | \$ 0       | \$ 0 | \$ 0       | \$ 0 | \$ 0    | \$ 0   | \$ 0      | \$ 0 | \$ 0         |
| EP8008          | EP8008-NUOVA EPS   | 1                     | \$ 0                               |       | \$ 0          |       | \$ 0       | \$ 0 | \$ 0       | \$ 0 | \$ 0    | \$ 0   | \$ 0      | \$ 0 | \$ 0         |
| <b>TOTALES:</b> |                    |                       |                                    |       |               |       |            |      |            |      |         | \$ 0   | \$ 0      | \$ 0 | \$ 0         |

| TOTAL APORTES A RIESGOS PROFESIONALES |          |        |  |                |                     |                      |          |               |           |             |
|---------------------------------------|----------|--------|--|----------------|---------------------|----------------------|----------|---------------|-----------|-------------|
| ADMINISTRADORA                        |          | NOMBRE |  | No. COTIZANTES | NÚMERO AUTORIZACIÓN | PAGO A OTROS RIESGOS |          | SALDO A FAVOR |           | LÍQUIDACIÓN |
|                                       |          |        |  | 2              |                     | VALOR                | PLANILLA | VALOR         |           | COTIZACIÓN  |
| 14-11                                 | CÓDIGO   |        |  |                |                     | \$ 0                 |          |               |           |             |
| 14-11                                 | ARL SURA |        |  |                |                     | \$ 0                 |          |               |           |             |
| SUB-TOTALES:                          |          |        |  |                |                     | \$ 0                 |          | \$ 10.800     | \$ 16.800 |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$ 0      |             |
|                                       |          |        |  |                |                     |                      |          | \$ 0          | \$        |             |

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|              |                  |
|--------------|------------------|
| <b>TOTAL</b> | <b>\$ 69.600</b> |
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| CÓDIGO       |  | ADMINISTRADORA | NOMBRE | TOTAL APORTES A REINVERSIÓN |            |      |                     |      |             |      |      |              |      |       |      |            |            |      |      |            |      |         |            |
|--------------|--|----------------|--------|-----------------------------|------------|------|---------------------|------|-------------|------|------|--------------|------|-------|------|------------|------------|------|------|------------|------|---------|------------|
|              |  |                |        | No. COTIZANTES              | COTIZACIÓN |      | APORTES VOLUNTARIOS |      | SOLIDARIDAD |      | FSP  | SUBSISTENCIA |      | MEDIO |      | COTIZACIÓN |            | FSP  |      | APORTES    |      | TOTALES |            |
|              |  |                |        | 1                           | \$ 115.200 | \$ 0 | \$ 0                | \$ 0 | \$ 0        | \$ 0 | \$ 0 | \$ 0         | \$ 0 | \$ 0  | \$ 0 | \$ 0       | \$ 115.200 | \$ 0 | \$ 0 | \$ 115.200 | \$ 0 | \$ 0    | \$ 115.200 |
|              |  |                |        | 1                           | \$ 115.200 | \$ 0 | \$ 0                | \$ 0 | \$ 0        | \$ 0 | \$ 0 | \$ 0         | \$ 0 | \$ 0  | \$ 0 | \$ 0       | \$ 115.200 | \$ 0 | \$ 0 | \$ 115.200 | \$ 0 | \$ 0    | \$ 115.200 |
| SUB-TOTALES: |  |                |        |                             |            |      |                     |      |             |      |      |              |      |       |      |            | \$ 230.400 |      |      | \$ 230.400 |      |         | \$ 230.400 |
|              |  |                |        |                             |            |      |                     |      |             |      |      |              |      |       |      |            | \$ 230.400 |      |      | \$ 230.400 |      |         | \$ 230.400 |

| ADMINISTRADORA |                      | TOTAL APORTES A SALUD |                               |              |                    |          |               |            |             |            |      |         |           |           |              |
|----------------|----------------------|-----------------------|-------------------------------|--------------|--------------------|----------|---------------|------------|-------------|------------|------|---------|-----------|-----------|--------------|
| CÓDIGO         | NOMBRE               | Nº<br>COTIZANTES      | INCAPACIDAD POR<br>ENFERMEDAD |              | LICENCIA MATERIDAD |          | SALDO A FAVOR |            | LIQUIDACIÓN |            | MORA |         | TOTALES   |           |              |
|                |                      |                       | VALOR                         | AUTORIZACIÓN | VALOR              | PLAZILLA | VALOR         | COTIZACIÓN | UPC         | COTIZACIÓN | UPC  | APORTES | MORA      | DESCUENTO | VALOR PAGADO |
| EPB307         | EPB307 ALUEVA EPS    | 1                     | \$ 0                          | \$ 0         | \$ 0               | \$ 0     |               |            | \$ 0        | \$ 28.800  | \$ 0 | \$ 0    | \$ 28.800 | \$ 0      | \$ 28.800    |
| EPB005         | EPB005-SANTITAS S.A. | 1                     | \$ 0                          | \$ 0         | \$ 0               | \$ 0     |               |            | \$ 0        | \$ 28.800  | \$ 0 | \$ 0    | \$ 28.800 | \$ 0      | \$ 28.800    |
| TOTALES:       |                      |                       |                               |              |                    |          |               |            | \$ 0        | \$ 57.600  | \$ 0 | \$ 0    | \$ 57.600 | \$ 0      | \$ 57.600    |

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| CÓDIGO       |  | ADMINISTRADORA       |  | TOTAL APORTES A CAJA DE COMPENSACIÓN FAMILIAR |  | NOMBRE |  | Nº. COTIZANTES |  | APORTES   |  | MORA |  | VALOR PAGADO |  |
|--------------|--|----------------------|--|-----------------------------------------------|--|--------|--|----------------|--|-----------|--|------|--|--------------|--|
| C/69         |  | CFEBS.COMI/ALCAINARE |  |                                               |  |        |  | 2              |  | \$ 28,800 |  | \$ 0 |  | \$ 28,800    |  |
| SUB-TOTALES: |  |                      |  |                                               |  |        |  |                |  | \$ 28,800 |  | \$ 0 |  | \$ 28,800    |  |

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|              |                   |
|--------------|-------------------|
| <b>TOTAL</b> | <b>\$ 417.200</b> |
|--------------|-------------------|



PLANILLA INTEGRADA AUTOLIQUIDACIÓN APORTES  
SOPORTE DE PAGO GENERAL



|                                                                                                                                                             |                                                                                                                  |                                                                                                  |                                                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| DATOS GENERALES DEL APORTANTE                                                                                                                               |                                                                                                                  | DATOS GENERALES DE LA PLANILLA                                                                   |                                                               |
| TIPO IDENTIFICACIÓN:<br>NOMBRE O RAZÓN SOCIAL:<br>DIRECCIÓN:<br>TIPO EMPRESA:<br>APORTANTE EL OBLIGADO PAGO APORTES SALUD, SEÑA E ICSP (REFORMA TRIBUTARIA) | NT<br>MONTERÍA<br>CR 15 124 17 OF 104<br>01-EMPLOYADOR CLASE APORTANTE:<br>PRIVADA ACTIVIDAD ECONÓMICA:<br>UNICO | NÚMERO PLANILLA:<br>PERÍODO COTIZACIÓN OTROS<br>DÍAS DE MORA:<br>FECHA PAGO (formato AAA-MM-DD): | 4378780381<br>2021<br>0<br>2021-02-08<br>NÚMERO AUTORIZACIÓN: |
| NÚMERO PLANILLA:<br>PERÍODO COTIZACIÓN OTROS<br>DÍAS DE MORA:<br>FECHA PAGO (formato AAA-MM-DD):                                                            |                                                                                                                  | 4378780381<br>2021<br>0<br>2021-02-08<br>NÚMERO AUTORIZACIÓN:                                    |                                                               |

| TOTAL APORTES A PREVENCIÓN |                  |                     |            |           |           |             |              |             |              |
|----------------------------|------------------|---------------------|------------|-----------|-----------|-------------|--------------|-------------|--------------|
| ADMINISTRADORA             |                  | APORTES VOLUNTARIOS |            | FSP       |           | MORA        |              | TOTALES     |              |
| CODIGO                     | NOMBRE           | Nº COTIZANTES       | COTIZACIÓN | EMPLEADOR | COTIZANTE | SOLIDARIDAD | SUBSISTENCIA | LIQUIDACIÓN | VALOR PAGADO |
| 280201                     | 33001-PROTECCIÓN | 1                   | \$ 53.400  |           | \$ 0      | \$ 0        | \$ 0         | \$ 0        | \$ 53.400    |
| 280301                     | 33001-PORVENIR   | 2                   | \$ 106.800 |           | \$ 0      | \$ 0        | \$ 0         | \$ 0        | \$ 106.800   |
| SUBTOTAL:                  |                  |                     |            |           |           |             |              |             | \$ 160.200   |

| TOTAL APORTES A SALUD |                   |                    |            |               |           |             |              |             |              |
|-----------------------|-------------------|--------------------|------------|---------------|-----------|-------------|--------------|-------------|--------------|
| ADMINISTRADORA        |                   | LICENCIA MATERIDAD |            | SALDO A FAVOR |           | MORA        |              | TOTALES     |              |
| CODIGO                | NOMBRE            | Nº COTIZANTES      | COTIZACIÓN | EMPLEADOR     | COTIZANTE | SOLIDARIDAD | SUBSISTENCIA | LIQUIDACIÓN | VALOR PAGADO |
| EP-003                | EP-003-PROTECCIÓN | 1                  | \$ 53.400  |               | \$ 0      | \$ 0        | \$ 0         | \$ 0        | \$ 53.400    |
| EP-003                | EP-003-PROTECCIÓN | 2                  | \$ 106.800 |               | \$ 0      | \$ 0        | \$ 0         | \$ 0        | \$ 106.800   |
| SUBTOTAL:             |                   |                    |            |               |           |             |              |             | \$ 160.200   |

| TOTAL APORTES A RIESGOS PROFESIONALES |                 |                    |            |               |           |             |              |             |              |
|---------------------------------------|-----------------|--------------------|------------|---------------|-----------|-------------|--------------|-------------|--------------|
| ADMINISTRADORA                        |                 | LICENCIA MATERIDAD |            | SALDO A FAVOR |           | MORA        |              | TOTALES     |              |
| CODIGO                                | NOMBRE          | Nº COTIZANTES      | COTIZACIÓN | EMPLEADOR     | COTIZANTE | SOLIDARIDAD | SUBSISTENCIA | LIQUIDACIÓN | VALOR PAGADO |
| 14-11                                 | 14-11-ARL SURIA | 3                  | \$ 158.400 |               | \$ 0      | \$ 0        | \$ 0         | \$ 0        | \$ 158.400   |
| SUBTOTAL:                             |                 |                    |            |               |           |             |              |             | \$ 158.400   |

| TOTAL APORTES A CAJA DE COMPENSACIÓN FAMILIAR |                      |                    |            |               |           |             |              |             |              |
|-----------------------------------------------|----------------------|--------------------|------------|---------------|-----------|-------------|--------------|-------------|--------------|
| ADMINISTRADORA                                |                      | LICENCIA MATERIDAD |            | SALDO A FAVOR |           | MORA        |              | TOTALES     |              |
| CODIGO                                        | NOMBRE               | Nº COTIZANTES      | COTIZACIÓN | EMPLEADOR     | COTIZANTE | SOLIDARIDAD | SUBSISTENCIA | LIQUIDACIÓN | VALOR PAGADO |
| CC-003                                        | CC-003-COMPACSA SURE | 3                  | \$ 158.400 |               | \$ 0      | \$ 0        | \$ 0         | \$ 0        | \$ 158.400   |
| SUBTOTAL:                                     |                      |                    |            |               |           |             |              |             | \$ 158.400   |

| TOTAL APORTES A CAJA DE COMPENSACIÓN FAMILIAR |                      |                    |            |               |           |             |              |             |              |
|-----------------------------------------------|----------------------|--------------------|------------|---------------|-----------|-------------|--------------|-------------|--------------|
| ADMINISTRADORA                                |                      | LICENCIA MATERIDAD |            | SALDO A FAVOR |           | MORA        |              | TOTALES     |              |
| CODIGO                                        | NOMBRE               | Nº COTIZANTES      | COTIZACIÓN | EMPLEADOR     | COTIZANTE | SOLIDARIDAD | SUBSISTENCIA | LIQUIDACIÓN | VALOR PAGADO |
| CC-003                                        | CC-003-COMPACSA SURE | 3                  | \$ 158.400 |               | \$ 0      | \$ 0        | \$ 0         | \$ 0        | \$ 158.400   |
| SUBTOTAL:                                     |                      |                    |            |               |           |             |              |             | \$ 158.400   |

TOTAL \$ 290.100