|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 被保険者記号番号 | | | | | | | | | 国札 | | | | ― | | | | | | | | | 世帯主氏名 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 死亡した被保険者氏名 | | | | | | | | |  | | | | | | | | | | | | | 申請者との続柄 | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| 死亡年月日 | | | | | | | | | 年 　月 　日 | | | | | | | | | | | 葬祭執行年月日 | | | | | | | | | | | 年 　月 　日 | | | | | | | | | | | | | | | | | | | | | | |
| 確認欄 | | | | | | | | | 上記 死亡を | | | | | * 火葬埋葬許可証 * 戸籍謄（抄）本 * 住基台帳 * 国保被保険者台帳 * 住民異動届(国保用) * 死亡診断書 | | | | | | | | | | | により確認しました。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 札幌市事務職員 | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |
| 備考 | | | | | | | | |  | | | | |  | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 申請年月日 | |  | 年 | |  | | 月 |  | | 日 | 申請金額 | | | | | | | | | | | | |  | |  |  | 十億 | |  | | |  | | | 百万 | |  | |  | | | | 千 | |  | |  | |  | 円 | | |
|  |  | |  | |  |  | |  |  | |  |  |  | |  | | |  | | |  | | ￥ | | 3 | | | | 0 | | 0 | | 0 | | 0 |
|  | | | | | | | 請求番号 | | | | | | | |  | |  |  |  | | 電話番号　　　　－ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 申請者 | 郵便番号 住所 フリガナ 氏名 | | | □□□-□□□□  札幌市 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | 申請印 | | | | | | | | | | |
|  | | | | | | | | | | |
| (あて先) | 札幌市 | | | 区長 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | |
| 申請者（葬祭を行った方）の口座  金融機関 | | | | | | | | | | | | | | | | | | | | | | | 預金種目 | | | | | | 口座番号 | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | 銀行･信金 信組･農協 | | | | | |  | | | | 本店･出張所 支店･支　所 | | | | | | | １ 普 通 ２ 当 座 ３ 納準･別段 | | | | | |  | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | |  | |  | | |  | | |  | |  | | |  | |  |  |

国民健康保険葬祭費支給申請書

(第三者行為　　該当・非該当)

※　添付資料―喪主・施主がわかる会葬はがき又は領収書

注意　未納の保険料がある方については，給付の全部または一部を差し止めることがありますので，必ず保険料を完納のうえ，申請をしてください。