様式第9号（第6条関係）

入院患者一部負担金調定及び徴収補助簿

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| 番号 | 地区 | 氏名 | | 月　10　日 | | | | | | 月　20　日 | | | | | | 月　31　日 | | | | | |
| 世帯主 | 患者名 | 金額 | 診断書 | 給食 | ガソ  リン | 合計 | 納入  月日 | 金額 | 診断書 | 給食 | ガソ  リン | 合計 | 納入  月日 | 金額 | 診断書 | 給食 | ガソ  リン | 合計 | 納入  月日 |
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