|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | |  | |  | |  | | | | | | | | | | |
|  | |  | |  | |  | | | | 届出年月日 | | 年　　月　　日 | | | | |
|  | |  | |  | |  | | | | 所属 | |  | | | | |
|  | | | | | |  | | | | 申請者 | |  | | | ㊞ | |
| 慶弔見舞金支給申請書 | | | | | | | | | | | | | | | | |
| 下記により、慶弔見舞金の支給をお願いいたします。 | | | | | | | | | | | | | | | | |
| 記 | | | | | | | | | | | | | | | | |
| １．受給者所属氏名 | | | | | | | | | | | | | | | | |
|  | 所属 | |  | | | | | 入社年月日 | | | 年　　月　　日 | | | | |  |
|  | 氏名 | |  | | | | | 退職年月日 | | | 年　　月　　日 | | | | |  |
| ２．種類（○印を記入） | | | | | | | | | | | | | | | | |
|  |  | |  | | 結婚祝金 | | |  | 死亡弔慰金 | | | |  | | |  |
|  |  | |  | | 出産祝金 | | |  | 葬祭料 | | | |  | | |  |
|  |  | |  | | 疾病見舞金 | | |  | 災害見舞金 | | | |  | | |  |
| ３．支給事由及び発生日時（詳細を対象者等がわかるように記入する） | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |  |
|  |  | | | | | | | | | | | | | | |  |
|  |  | | | | | | | | | | | | | | |  |
|  |  | | | | | | | | | | | | | | |  |
| ４．支給額 | | | | | | | | | | | | | | | | |
|  | 申請者記入 | | | | | | | 総務記入 | | | | | | | |  |
|  |  | | | | | | 円 |  | | | | | | 円 | |  |
| ５．備考 | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | |  |
|  |  | | | | | | | | | | | | | | |  |
|  |  | | | | | | | | | | | | | | |  |
|  |  | | | | | | | | | | | | | | |  |