様式第1号(その2)(第2条関係)

NO

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| 区分 | 給付年月日 | 内容 | | 費用額 | | 取扱者 |
| 交付負担額 | 本人負担額 |
| 更生医療 |  |  | |  |  |  |
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| 区分 | 給付年月日 | 種目 | 交・修 | 費用額 | | 取扱者 |
| 交付負担額 | 本人負担額 |
| 補装具 |  |  |  |  |  |  |
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| 日常生活用具 |  |  | |  |  |  |
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