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| 様式第23号(第5条の14関係) | | | | | | | | | | | |  | | | | | | |  | | | |  | |  | | | |  | | | | |  | | | | | | |
| 計画相談支援給付費・障害児相談支援給付費支給取消通知書 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | | | | 丸亀市福祉事務所長 | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| 障害者の日常生活及び社会生活を総合的に支援するための法律第５１条の１７第１項・児童福祉法第２４条の２６第１項の規定に基づき、計画相談支援給付費・障害児相談支援給付費の支給について、下記のとおり決定したので通知します。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 記 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 障害福祉サービス  受給者証  番号 | | | |  | | |  |  | |  |  | | |  |  | |  |  | |  | 地域相談支援  受給者証  番号 | | | | |  |  |  | |  |  |  |  | | |  | |  | |  |
| 通所受給者証番号 | | | |  | | |  |  | |  |  | | |  |  | |  |  | |  |  | | | | | | | | | | | | | | | | | | | |
| 支給取消に係る  障害者（保護者） | | | |  | | | | | | | | | | | | | | | | | 支給取消に係る  児童氏名 | | | | |  | | | | | | | | | | | | | | |
| 支給取消日 | | | | 年 月 日 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 取消理由 | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 障害福祉サービス受給者証、地域相談支援受給者証又は通所受給者証の提出期限及び提出先 | | | |  | | | | | | | | | | | | 提出先： | | | | | | 丸亀市 　　　　部 　　課 | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | 提出期限： | | | | | | 年 月 | | | | | | | | | | | | | | | | | | |
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| 不服申立て及び取消訴訟 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| １ | この決定について不服があるときは、この通知書を受け取った日の翌日から起算して３か月以内に丸亀市長に対し審査請求をすることができます。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ２ | この処分の取消しを求める訴えは、この処分の通知を受けた日の翌日から起算して６か月以内に限り、丸亀市を被告として(訴訟において丸亀市を代表する者は丸亀市長となります。)提起することができます(なお、この処分の通知を受けた日の翌日から起算して６か月以内であっても、この処分の日の翌日から起算して１年を経過するとこの処分の取消しの訴えを提起することができなくなります。)。また、この処分の通知を受けた日の翌日から起算して３か月以内に審査請求をした場合には、この処分の取消しの訴えは、その審査請求に対する裁決を受けた日の翌日から起算して６か月以内であれば、提起することができます(なお、その審査請求に対する裁決を受けた日の翌日から起算して６か月以内であっても、その審査請求に対する裁決の日の翌日から起算して１年を経過するとこの処分の取消しの訴えを提起することができなくなります。)。 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 問い合わせ先 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 丸亀市 　　　　部 　　課 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | 住所 | | 香川県丸亀市大手町二丁目４番21号 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | 電話 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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