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| 収入申告書（課税所得がない人） | | | | | | | | | | | | | | | | | | | | | |
|  | 年　　　月　　　日提出 | | | | | | | | | | | | | | | | | | | |  |
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|  | 私は、次の事由により前年度の課税所得はありません。 | | | | | | | | | | | | | | | | | | | |  |
|  | 【理　由】 | | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | １．次の非課税給付を受給しているため（□８０万円以下　　□８０万円超） | | | | | | | | | | | | | | | | | | | |  |
|  |  | □障害年金（１級・２級）　　　□労災給付　　　□雇用保険　　　□遺族年金 | | | | | | | | | | | | | | | | | |  |  |
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|  |  | □児童扶養手当　　　□障害者手当　　　□その他（　　　　　　　　　　　　　） | | | | | | | | | | | | | | | | | |  |  |
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|  | ２．扶養されているため | | | | | | | | | | | | | | | | | | | |  |
|  | 誰に扶養されていますか。 | | | | | | | | | | | | | | | | | | | |  |
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|  | ３．生活保護をうけているため | | | | | | | | | | | | | | | | | | | |  |
|  | ✽保護証明書を添付してください。 | | | | | | | | | | | | | | | | | | | |  |
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|  | ４．その他 | | | | | | | | | | | | | | | | | | | |  |
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|  |  | 理由(生活状況等を記入してください。) | | | | | | | | |  |  |  |  |  |  |  |  |  |  |  |
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