様式第２号（第４条関係）

中小企業退職金共済制度共済掛金納付状況報告書

加入共済制度　　　□中小企業退職金共済制度（中退共）　　　□北海道中小企業従業員退職金共済制度（特退共）

申請事業所名

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | 従業員(被共済者) | | 加入  年月日 | 年度月別掛金納付額（国等の助成金額を除く） | | | | | | | | | | | | | | 補助金  交付率（1/2）  　　　　　Ｂ | 補助金額  (百円未満切捨)  Ｃ(限度額有)＝  Ａ×Ｂ |
| 居住先  市町村 | 氏　名 | １月 | ２月 | ３月 | ４月 | ５月 | ６月 | ７月 | ８月 | ９月 | 10月 | 11月 | | 12月 | 計  　 Ａ |
| １ |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  | 円 |  | 円 |
| ２ |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |
| ３ |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |
| ４ |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |
| ５ |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |
| ６ |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |
| ７ |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |
| ８ |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |
| ９ |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |
|  | | | | | | | | | | | | | | | 補助金交付申請額 | | | | 円 |
|  |

※補助金額欄は、補助金交付率１/２、補助限度額は月額1,000円(年額12,000円)として記載する。