富山県看護協会　会員管理担当　宛

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**平成30年度会費納入者一覧**

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| 施設番号 |  | 施設名 |  |
| 担当者役職 |  | 担当者名 |  |
| TEL |  | FAX |  |

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| **振込日** |  | **人　数** |  | **金　額** |  |

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|  | 県会員No | 会員名 | 金額 | 備考 |
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【協会使用欄】

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| --- | --- | --- | --- | --- |
| 協会受付日 | 納入方法 | 日看送金日 | 入金消込日 |  |
|  | 振込・現金 |  |  |  |