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| 第　　　　　号  年　　月　　日  　　都道府県知事　殿  市　町　村　長　印  特別児童扶養手当証書受領書 | | | | |
|  | 受給者氏名 | 証書の記号・番号 | 備考 |  |
|  |  | **編集１** |
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**自由記載１**