

一人親方概算保険料 11月～(5ヶ月)

給付基礎日額	保険料	事務組合会費	合計
6,000	16,425	2,000	18,425
7,000	19,161	2,000	21,161
8,000	21,899	2,000	23,899
9,000	24,637	2,000	26,637
10,000	27,374	2,000	29,374
12,000	32,850	2,000	34,850
14,000	38,324	2,000	40,324
16,000	43,799	2,000	45,799
18,000	49,275	2,000	51,275
20,000	54,749	2,000	56,749
22,000	60,224	2,000	62,224
24,000	65,700	2,000	67,700
25,000	68,436	2,000	70,436