

一人親方概算保険料 1月～(3ヶ月)

給付基礎日額	保険料	事務組合会費	合計
6,000	9,855	2,000	11,855
7,000	11,497	2,000	13,497
8,000	13,140	2,000	15,140
9,000	14,782	2,000	16,782
10,000	16,425	2,000	18,425
12,000	19,710	2,000	21,710
14,000	22,995	2,000	24,995
16,000	26,280	2,000	28,280
18,000	29,565	2,000	31,565
20,000	32,850	2,000	34,850
22,000	36,135	2,000	38,135
24,000	39,420	2,000	41,420
25,000	41,062	2,000	43,062