

一人親方概算保険料 6月～(10ヶ月)

給付基礎日額	保険料	事務組合会費	合計
6,000	32,850	2,000	34,850
7,000	38,324	2,000	40,324
8,000	43,799	2,000	45,799
9,000	49,275	2,000	51,275
10,000	54,749	2,000	56,749
12,000	65,700	2,000	67,700
14,000	76,649	2,000	78,649
16,000	87,599	2,000	89,599
18,000	98,550	2,000	100,550
20,000	109,499	2,000	111,499
22,000	120,449	2,000	122,449
24,000	131,400	2,000	133,400
25,000	136,874	2,000	138,874