　 様式第４号(第９条関係)

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| --- |
| 西予市新型コロナウイルス感染症対策資金  利子補給金交付申請書    　年　　　月　　　日  　西予市長　　　　　　　　　様  　　　　　　　　　　　　　　　　　　住　　　所  　　　　　　　　　　　　　　　　　　金融機関名  　　　　　　　　　　　　　　　　　　代表者氏名　　　　　　　　　　　　　㊞  西予市新型コロナウイルス感染症対策資金利子補給金交付要綱に基づく、  　　　　　　年度(２月１日～１月31日)における利子補給金を交付されたく、    　下記のとおり申請します。  記  　利子補給金交付申請額　　　金　　　　　　　　　　　　円也  (注)別紙(又は算出基礎がわかるもの)を添付のこと。 |

別　紙(様式第４号関係)

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| 新型コロナウイルス感染症対策資金融資状況及び利子補給金額計算書　　　　　　　　　　年度分  　　　　　　　　　　(２月１日～１月31日)   |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 融資先 | 当初  融資  年月日 | 融資  金額 | 据置  期間 | 償還期限  (約定返済日) | 期毎  割賦  償還額 | 期首  残高  Ａ | 繰上償還  又は  延滞元金  Ｂ | 補給  対象  残額  (Ａ－Ｂ)  Ｃ | 当期  融資  日数  Ｄ | 積　数  (Ｃ×Ｄ)  Ｅ | 融資  平均  残高  (Ｅ/365)  Ｆ | 補給額  (F×0.5％) | 備考 | |  | 年月日 | 千円 | 月 | 年月 | 千円 | 千円 | 千円 | 千円 | 日 | 千円 | 円 | 円 |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   (注)  １)弁済期ごとに行を分けること。  ２)備考欄には、繰上償還、延滞等の状況を記載すること。 |