

Request for Childcare Fees [Reimbursement]

施設等利用費請求書 (償還払い)

[For request amount of the fees from 2026 / 04 to 2026 / 06]

Date: **2026 / 07 / 15**

To the Mayor of Misato City:

In accordance with the Child Welfare Act, article 30-11 section 1, I hereby request for the benefit regarding childcare fees as below. Please make a bank transfer to the designated account for reimbursement.

Additionally, I agree to the matters below upon examining my user's fees for childcare services:

1. That Misato City confirm that both the applicant and the child to be certified reside in Misato City in the Basic Resident Register.
2. Misato City confirm with the subject institution that the applicant is actually using it.
3. Misato City check with the subject institution the status of the applicant's payment for using it.
4. Misato City check the tax status of the applicant's household.

1. Guardian [Applicant] who is approved on the necessity of using childcare service:

Furigana	ミサト タロウ	Relations hip to the approved child	Father	Date of birth	1995 / 05 / 01
Name	MISATO, Taro	三郷		Current address	648-1 Hanawada, Misato City

It is ten-digit significant digits at the most indicated in the section 'Approved child' of 'Notice of the Approval on the necessity of using childcare institution'.

2. Child who received an approval [approved child] (Please apply per approved child.)

Types of approval under the Act article 30-4	☒ Category 2 ☐ Category 3	Approval Number	567890
Date of birth	2022 / 09 / 01	Furigana	ミサト ジロウ
Address from April 1, 2026 to June 30, 2026	☒ Same as the current address ☐ Moved in ☐ Moved out	Name	MISATO, Jiro
If you moved in or moved out during the above period, please fill in the date of it.			YYYY / MM / DD

3. Enter the information about the institution where your child is enrolled.

Furigana	ハナワダ ヨウチエン	Location	〒 -
Institution name	Hanawada Yochien	(Fill in if it is located outside of Misato City.)	Phone:
Enrollment status from April 1, 2026 to June 30, 2026	☒ Enrolled during the above period ☐ Enrolled in the middle of the period ☐ Withdrew in the middle of the period		
If your child was enrolled or withdrew in the midst of the above period, please fill in the date.	YYYY / MM / DD		

Please also fill out the reverse side. Make sure to attach your 'Receipt(s) and Proof of using childcare service'.

If you received the benefits before and wish to designate the same bank account, please check the box.
(In this case, you do not need to fill in the section about account information below.)

4. Please fill in the account information to which the reimbursement should be transferred.

If it is the bank account same as before, check the box with ☒. ⇒ ☐

Financial institution name		Type of deposit ☒	☐ Ordinary savings account ☐ Checking account				
Misato-shi Bank Shinkin JA Credit union	Hanawada Branch/ Sub branch	Account number	1	1	1	1	1
		Account holder's name	ミサト タロウ				

*When you designate a new transfer account, please attach a document showing the 'Branch name (for JP Bank, branch name or number)', 'Account number', and 'Account holder's name'.

If you prefer to designate Yucho [JP] Bank, please enter the three-digit Branch number/ branch name on the passbook.

5. Please fill in this form if you are eligible to receive reimbursement of the user's fees at non-licensed child care institution other than the Extra childcare fees at the institution where your child is enrolled.

①	Furigana	ハナワダ ホイクシツ	Location	〒 341-〇△□
	Institution/ service providers name	Hanawada Hoikushitsu		〇△□ Hanawada, Misato City Phone: 111-111-111
②	Furigana		Location	〒 Phone:
	Institution/ service providers name			
③	Furigana		Location	〒 Phone:
	Institution/ service providers name			
④	Furigana		Location	〒 Phone:
	Institution/ service providers name			

You may be eligible for the benefits of non-licensed child care institution in addition to the Extra childcare service of the kindergarten (except in case where the kindergarten provides childcare services for 8 hours or more on weekdays and 200 days or more a year).
*Some institutions may not be eligible for the free of charge system. Please inquire with the institution you are using or the municipal office where the institution is located.

6. Fill in the details of reimbursement of Extra childcare program at your child's institution and non-licensed child care institution.

Date of use	Extra childcare program at institution where the child is enrolled				Amount paid to non-licensed child care institution (d)	Request amount (Enter the lesser amount of 'c + d' and the monthly maximum amount)
	Amount paid to the institution (a)	Number of days used	Eligible amount (b) 490×Number of days used	Enter the lesser amount (c) of a or b.		
April in 2026	10,000 円 yen	10 day(s)	4,900 yen	4,900 yen	0 yen	4,900 yen
May in 2026	10,000 円 yen	20 day(s)	9,800 yen	9,800 yen	0 yen	9,800 yen
June in 2026	10,000 円 yen	10 day(s)	4,900 yen	4,900 yen	20,000 yen	12,300 yen

Since the unit rate per day is not specified for non-licensed child care institutions, the benefit is limited to the difference of '12,300 yen - (C) = '.

Following pages are the forms for request. Please detach when claiming for the subsidy.

Request for Childcare Fees [Reimbursement] (Month of use from April to June): 1 copy

⇒ Please use it when claiming around July.

Request for Childcare Fees [Reimbursement] (Month of use from July to September): 1 copy

⇒ Please use it when claiming around October.

Request for Childcare Fees [Reimbursement] (Month of use from October to December): 1 copy

⇒ Please use it when claiming around January.

Request for Childcare Fees [Reimbursement] (Month of use from January to March): 1 copy

⇒ Please use it when claiming around April