様式第１７号　　　　　　　　　　　　　　　　　　　　　　　　　　（協定団体→地区社協→市社協）

参加者名簿（地域包括ケア加算団体必須）

※各地区サロン連絡会で提示をお願いします（提出不可）※指定の用紙以外でも可

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| 合計 | |  |  |  |  |  |  |  |  |  |  |  |  |