① Health che	ck-up for pregnant woman	Itemized receipt(妊婦健診領収証明書)		
Name of pregnant wom	nan (妊婦氏名)			
Date of Birth (Year/Mo				
Date of Examination (診察日)				
Fee for the routine hea	lth check-up for pregnant wom			
Important : Please o	arefully read the followings	(Example ; 50.00USD) s and check where applicable.		
重要 以下の項目をよくお記	売みになって、該当していればチェッ	クをしてください。		
$\Box$ The fee paid was for routine health check-up of a pregnant woman and the growth of fetus, including				
physical examination, blood test, blood pressure measurement and urine test.  (費用は、妊婦の健康状態と胎児の発育を見るための定期の妊婦健診にかかるもので、血液検査、血圧測定、尿検査などを含んだものです。)				
□ In addition to above, the fee does not include charges not directly related to pregnancy related issues.  (費用は、妊婦健診に直接関係しないものを含んでいません。)				
$\Box$ In addition to above, the fee does not include charges for the treatment of complications and diseases,				
such as anemia, hypertension of pregnancy and pregnancy diabetes. (費用は、貧血、妊娠の高血圧症および妊娠糖尿病のような、合併症および疾病の治療の代金を含んでいません。)				
☐ The fee is not covered by health insurance or any other services in this country.				
(費用は、この国の健康保険やそのほかのサービスを受けていません。)				
Comment in particular	or any other information(特記	事項があればお書きください。)		
Name and Address of attending Physician (OB/GYN) of Hospital or Clinic				
Name:				
Address:				
Date:	Signature:			

**Please attach the receipt issued by hospital here.** (医療機関等発行の領収書を貼付してください。)

If you have something showing the exchange rate of the checkup date, please bring it with you.

(健診日当日の為替レートが分かるものがあれば、持参してください。)

If you do not have anything showing the exchange rate on the day, *Kodomo-katei-ka* (Child and Family Div.) will calculate according to the exchange rate at the time of application.

will calculate according to the exchange rate at the time of application.			
(健診日当日の為替レー	トが分からない場合は、	こども家庭課が申請日の為替レートで計算します。)	

Today's exchange rate(健診日当日の為替) 1 = JPY

(Example; 1USD=100JPY)

<u>日本円</u> JPY