

實踐大學 收 據 Receipt

Shih Chien University

機密等級：機密級

費別 (請勾選) Expense Category (please check one box)	
<input type="checkbox"/> 演講 Speech 題目 Title of Speech : _____ 演講日期 Date of Speech : _____年(Y) _____月(M) _____日(D) 演講者來自地區 Speaker's Country of Origin : _____	計算標準 Standard of Payment :
<input type="checkbox"/> 其他 Others 費別 Expense Item : _____講座鐘點費 日期 Date : _____年(Y) _____月(M) _____日(D) 領款者來自地區 Recipient's Country of Origin : _____	
給付總額 Total Amount Paid	
新台幣 (大寫) NT (Bank Style Capitals) : _____ 元整 NT \$:	
扣除額 (請勾選)	<input type="checkbox"/> 所得稅 Tax Withheld 新台幣 NT \$: _____
	<input type="checkbox"/> 二代健保個人補充保費 Second-Generation NHI Supplementary Premium 新台幣 NT \$: _____
	<input type="checkbox"/> 其他 Others 新台幣 NT \$: _____
給付淨額 Net Payment	

**此處若講師填寫時有錯誤
請直接作廢
讓講師重新填寫一張新表格**

姓名 Name

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領款

Signatur

Foreign and Mainland Chinese nationals must provide a copy of their passport or A.R.C.

2.各類代扣稅額請依標準率扣繳。

Taxes are withheld according to law.

3.代扣二代健保個人補充保費依行政院衛生署中央健保局發布之二代健保法(102年1月1日實施)。

As is stipulated by the National Health Insurance Act, the Health Insurance supplementary premium shall be deducted directly from the individual's salary. By order of the Executive Yuan, the implementation of this article shall begin on January 1, 2013.

4.實踐大學為會計帳務之目的，本收據所蒐集之個人資訊，將僅作為本次會計帳務之用，學校將保留本申請表10年，期滿後即依規定銷毀。您得以下列聯絡方式行使查閱、更正等個人資料保護法第3條的當事人權利。如您提供的資料不完整或不確實，將無法完成本收據的申請。

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費別 (請勾選) Expense Category (please check one box)

☐ 演講 Speech

計算標準 Standard of Payment :

題目 Title of Speech :

此處請空白

由行政老師填寫

給付淨額 Net Payment

新台幣 NT\$:

姓名 Name (as in passport)

外僑及大陸人士加填資料

Foreign and Mainland Chinese nationals must fill out this section

國籍 Nationality

護照號碼 Passport No.

西元出生年月日 Date of Birth

統一證號 Taxpayer's ID NO.

年 Y 月 M 日 D

外僑或大陸人士請填內政部登記配賦碼

給付年度內按所得人護照入出境簽證日累計

Foreign and Mainland Chinese nationals should fill in the ID NO. in their A.R.C.

在台居住是否滿 183 天? ☐ 是 Y ☐ 否 N

Have you been in Taiwan for more than 183 days during this year?

戶籍地址：

Permanent Address

通訊地址：

Current Address

聯絡電話：

TEL

電子信箱：

E-mail

領款人簽章：

Signature

領款日期：

Date of Receipt

年(Y)

月(M)

日(D)

備註：1. 外僑或大陸人士請另附護照或居留證影本。

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