



GENERAL EXPENSE CLAIM FORM



Company Name: **MAC**

Department Name: **Administration**

No.	Date	Name	Description	Amount	Remark
1.	20.1.25	Aung Thihaingyi	ဇွန် ၂၅ (အလုပ်ခွင် အိမ်ထောင်) ဘဏ္ဍာရင်း	7,000/-	12.12.24 ရက်နေ့ ၀၀၆
			ဘဏ္ဍာရင်း	3,200/-	" "
			ဘဏ္ဍာရင်း	8,000/-	16.12.24 ရက်နေ့ ၀၀၆
			ပို: ဘဏ္ဍာရင်း	3,000/-	" "
			ဘဏ္ဍာရင်း	1,000/-	" "
			စုစုပေါင်း: 20 (၂၅) - 11000	22,000/-	17.12.24 ရက်နေ့ ၀၀၆
Total Amount				39,200/-	

Request by
Sign: *[Signature]*

Name: **Aung Thihaingyi**
(Requester)

Approved by
Sign: *[Signature]*

Name: **Sue Win**
(Department Head)

Checked by

Name: **Pyae Myo Tin**
(Related FNACorp FNA)

Approved by

Name: **Saint Thu**
(OM/AGM/GM/BOH)

Approved by

(ACDO/COO/MD/VCMD)
02-BCU-FNA-FRM-002-01



GENERAL EXPENSE CLAIM FORM



people origin

Company Name : **MAC**

Department Name : **Administration**

No.	Date	Name	Description	Amount	Remark
1.	18.12.24	Aung Thiha Mye	MAC ရုံးခြေ:ဝါး:၁၂: 3000/- 3000/- 11.12.24 နှင့် 17.12.24 ရက်	3,000/-	
Total Amount				3,000/-	

Request by

Sign :

Name : **Aung Thiha Mye**
(Requester)

Approved by

Name : **Swe Swe Win**
(Department Head)

Checked by

Name : **Pyae Phyo Zin**
(Related FNA/Corp FNA)

Approved by

Name : **Seint Thee**
(OM/AGM/GM/BOH)

Approved by

Date : **23/12/2024**
Name : **Aung Mye**
(ACOO/COO/MD/VCN)
02-BCU-FNA-FRM-002-01

