





ADVANCE REQUEST FORM

Requestor Name : Saw Htet Htet Hlaing	Budget Type : Include Budget
Department Name:	Payment Type : Advance Payment
Request Date : 2025-06-04	Advance Due Date : 06/30/2025
Payment Voucher : ADV-CE1-2025-06-00003	Prepared By : CE1_BudgetDataEntry
No	Superior Approved : CE1_BudgetDataEntry
Payment Method : Cash/Bank	By
Payment Amount : 195000.0	Last Approved By : Saw Nan Hlaing
Currency : MMK	
Exchange Rate : 4,440.0	

No.	Description	Department	Request Amount	Remark
1	SSB Charges For May-25	Administration(CE1)	195,000.00	

Expense Total 195,000.00 K
 Amount Remain 195,000.00 K

Note:

			
Superior Check By	F&A	GM/AGM	COO
Name : <u>Saw Htet Htet Hlaing</u>	Name : <u>Saw Nan Hlaing</u>	Name : <u>Min Thu Ya</u>	Name :
NRC No : <u>11/2025/06/00003</u>	NRC No : <u>21/2025/06/00003</u>	NRC No :	NRC No :
Date : <u>04-06-25</u>	Date : <u>4.6.25</u>	Date :	Date :
Remark :	Remark :	Remark :	Remark :