



CASH CLAIM FORM

Date : 1.4.2024

BU/BR/Division : MAC

Department : Logistics

Issue Amount : 7800k\$ Kyats/ USD

Budget include (or) Not :

Yes Budgeted Title and Amount :

No Reasons for :

Required For:

Payment the Car bridge Pass Charges for
5G-5582, 6E-6375, 9E-8867.

မှတ်ချက်။
(၁) အဆင့်ဆင့်သက်ဆိုင်ရာတာဝန်ရှိသူကြီးမင်းများအားလုံး သေချာစွာစုံစမ်းစစ်ဆေးတွက်ချက်ပြီးထားသော ငွေပမာဏဖြစ်ရပါမည်။
(The amount requested must be properly calculated, checked and verified by respective authorized person)
(၂) ထုတ်ယူငွေနှင့် ပတ်သက်၍ အမှားအယွင်း၊ လိမ်လည်မှု နှင့် အလွဲသုံးစားမှု တစ်စုံတစ်ရာ ရှိခဲ့ပါက၊ သက်ဆိုင်ရာ တာဝန်ရှိစစ်ဆေးအတည်ပြုသူက အပြည့် အဝ ပြန်လည်ရရှိအောင် တာဝန်ယူ ဆောင်ရွက်ပေးရမည်
(If there is errors, frauds or misappropriation, the authorized person must take full responsibility to recover the loss)

Request By	Checked By	Checked By	Approved By	Approved By
Requester	Mgr/DH	Finance & Account	GM/AGM/COO	CMC/CEO/Chairwoman
Phyto Hui oo	Wai Phyto Hon	Su Su Thin	Seint Seint Thu	



CAR BRIDGE PASS FORM

No	Date	Car No	Driver	Amount	Location	Remark
1	4.3.24	5G-5582	T.Z.H	200	27.9.2	
2	6.3.24	9E-8863	T.Z.H	500	27.9.2	
3	6.3.24	9E-8863	T.Z.H	500	27.9.2	
4	7.3.24	5G-5582	T.Z.H	200	27.9.2	
5	8.3.24	CJ-6375	T.Z.H	200	27.9.2	
6	9.3.24	9E-8863	T.Z.H	200	27.9.2	
7	14.3.24	9E-8863	T.Z.H	300	27.9.2	
8	14.3.24	5G-5582	T.Z.H	200	27.9.2	
9	22.3.24	5G-5582	T.Z.H	300	27.9.2	
10	25.3.24	5G-5582	T.Z.H	200	27.9.2	

T-2800
 PIC : T.Z.H Department Head: WPH Division Head: [Signature] 859
 Name: T.Z.H Name: WPH Name: [Signature] 859
 Sign: [Signature] Sign: WPH Sign: [Signature] 859

05-CHL-GAV-FRM-014-01



CAR BRIDGE PASS FORM

No	Date	Car No	Driver	Amount	Location	Remark
1	26.3.24	CJ-6375	T.Z.H	200	27.9.2	
2	26.3.24	CJ-6375	T.Z.H	200	27.9.2	
3	25.3.24	5G-5582	T.Z.H	200	27.9.2	
4						
5						
6						
7						
8						
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10						

T-600
 PIC : T.Z.H Department Head: WPH Division Head: [Signature] 859
 Name: T.Z.H Name: WPH Name: [Signature] 859
 Sign: [Signature] Sign: WPH Sign: [Signature] 859

05-CHL-GAV-FRM-014-01



CAR BRIDGE PASS FORM

No	Date	Car No	Driver	Amount	Location	Remark
1	5.3.24	GF6375	HMT	800	27.9.2	
2	6.3.24	"	"	200	27.9.2	
3	8.3.24	"	"	400	27.9.2	
4	12.3.24	"	"	600	27.9.2	
5	13.3.24	"	"	400	27.9.2	
6	14.3.24	"	"	400	27.9.2	
7	14.3.24	"	"	400	27.9.2	
8	16.3.24	"	"	200	27.9.2	
9	19.3.24	"	"	400	27.9.2	
10	22.3.24	"	"	200	27.9.2	

T-3400
 PIC : HMT Department Head: WPH Division Head: [Signature] 857
 Name: HMT Name: WPH Name: [Signature] 857
 Sign: [Signature] Sign: WPH Sign: [Signature] 857

05-CHL-GAV-FRM-014-01



CAR BRIDGE PASS FORM

No	Date	Car No	Driver	Amount	Location	Remark
1	23.3.24	GF-6375	HMT	800	27.9.2	
2	26.3.24	"	"	200	27.9.2	
3	27.3.24	"	"	200	27.9.2	
4	29.3.24	"	"	400	27.9.2	
5						
6						
7						
8						
9						
10						

T-1000
 PIC : HMT Department Head: WPH Division Head: [Signature] 857
 Name: HMT Name: WPH Name: [Signature] 857
 Sign: [Signature] Sign: WPH Sign: [Signature] 857

05-CHL-GAV-FRM-014-01

