

GENERAL EXPENSE CLAIM FORM



Company Name: MAC

Department Name: Administration

No.	Date	Name	Description	Amount	Remark
1.	5.11.24	Aung Thiha Mya	MAC BW P ခွဲ: ၅၂၀၀၀ အတွက် ခွဲ: စာပို့ဆောင်ခ ၃၆၀၀၀ = ၃၅၀၀ ကျပ် ၂၆၀၀၀ = ၃၀၀၀ ကျပ် ၃၀၀၀ x ၃၀၂၄ = ၉၀,၀၀၀	90,000/-	
Total Amount					

Requested by: *AHM*  
 Name: Aung Thiha Mya (Requester)  
 Approved by: *[Signature]*  
 Name: Pyaw Phyo Zin (Department Head)  
 Checked by: *[Signature]*  
 Name: Pyaw Phyo Zin (Subst. P.N.C. or P.N.A.)  
 Approved by: *[Signature]*  
 Name: Seint 2 Thee (Accountant)  
 Approved by: *[Signature]*  
 UMG FORM EXPENSE/1/10  
 (05-001-17/001/002/01)