





CLAIM REQUEST FORM

Requestor Name	: Thin Zar Moe Htet	Budget Type	: Include Budget
Department Name	: Production (ATT)	Payment Type	: Claim Payment
Request Date	: 2025-07-25	Prepared By	: Zin Nyein Oo(2)
Payment Voucher No	: EX ATT 2025-07-00016	Superior Approved By	: Aung Kyaw Myint(3)
Payment Method	: Cash/Bank	Last Approved By	: Aung Kyaw Myint(3)
Payment Amount	: 288000.0		
Currency	: MMK		
Exchange Rate	: 4,490.0		

No.	Description	Department	Request Amount	Remark
1	Machine repaired charges & paint charges, AP6-000023, PIC - Thin Zar Moe Htet	Production Department (ATT)	288,000.00	

Expense Total 288,000.00 K
Additional/Refund

Note: _____

				
Superior Check By	Name	F&A	GM/AGM	EOO
Name	: Ko Myint Moe Aung	Name	: Zin Nyein Oo	Name
NRC No	: _____	NRC No	: _____	NRC No
Date	: _____	Date	: _____	Date
Remark	: _____	Remark	: _____	Remark