




OVERTIME REQUEST FORM

BU/BR/DIV Name : MAC.
 Department Name : Logistics.
 Reason for Overtime : Ferry

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
1	9. 11. 24	Hloing Min Tun	D- Man.	6:00 AM	8:00 AM	2	2400	Ferry
2	"	"	"	5:00 PM	6:30 PM	1.30	1800	"
3	4. 11. 24	"	"	6:00 AM	8:00 AM	2	2400	"
4	"	"	"	5:00 PM	6:30 PM	1.30	1800	"
5	5. 11. 24	"	"	6:00 AM	8:00 AM	2	2400	"
6	"	"	"	5:00 PM	6:30 PM	1.30	1800	"
7	6. 11. 24	"	"	6:00 AM	8:00 AM	2	2400	"
8	"	"	"	5:00 PM	6:30 PM	1.30	1800	"
9	7. 11. 24	"	"	6:00 AM	8:00 AM	2	2400	"
						Total Hours	16hr	
						Total Amount	19200Ks	

Requested by:  Approved by: _____ Approved by: _____ Checked by: _____
 Sign: _____ Name: Hloing Min Tun. (Requestor) (DH) (GM/AGM/COO) (HR)


05-CHL-HRM-FRM-020-05



OVERTIME REQUEST FORM

BU/BR/DIV Name : MAC.
 Department Name : Logistics
 Reason for Overtime : Ferry.

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
10	7. 11. 24	Hloing Min Tun	D. Man.	5:00 PM	6:30 PM	1.30	1800	Ferry
11	8. 11. 24	"	"	6:00 AM	8:00 AM	2	2400	"
12	"	"	"	5:00 PM	6:30 PM	1.30	1800	"
13	11. 11. 24	"	"	6:00 AM	8:00 AM	2	2400	"
14	"	"	"	5:00 PM	6:30 PM	1.30	1800	"
15	12. 11. 24	"	"	6:00 AM	8:00 AM	2	2400	"
16	"	"	"	5:00 PM	6:30 PM	1.30	1800	"
17	13. 11. 24	"	"	6:00 AM	8:00 AM	2	2400	"
18	"	"	"	5:00 PM	6:30 PM	1.30	1800	"
						Total Hours	15hr	
						Total Amount	30Min	18600Ks

Requested by:  Approved by: _____ Approved by: _____ Checked by: _____
 Sign: _____ Name: Hloing Min Tun. (Requestor) (DH) (GM/AGM/COO) (HR)

05-CHL-HRM-FRM-020-05



OVERTIME REQUEST FORM

BU/BR/DIV Name : MAC.
 Department Name : Logistics.
 Reason for Overtime : Ferry

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
19.	14.11.24	Khoing Min Tun	D. Mon	6:00 AM	8:00 AM	2	2400	ferry
20	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
21	16.11.24	"	"	6:00 AM	8:00 AM	2	2400	"
22	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
23	18.11.24	"	"	6:00 AM	8:00 AM	2	2400	"
24	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
25	19.11.24	"	"	6:00 AM	8:00 AM	2	2400	"
26	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
27	20.11.24	"	"	6:00 AM	8:00 AM	2	2400	"
Total Hours						16hr	19200K	
Total Amount								

Requested by
 Sign :
 Name : Khoing Min Tun.
 (Requestor)

Approved by
 (DH)

Approved by
 (GM/AGM/COO)

Checked by
 (HR)

05-CHL-HRM-FRM-020-05



OVERTIME REQUEST FORM

BU/BR/DIV Name : MAC.
 Department Name : Logistics
 Reason for Overtime : Ferry.

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
28.	20.11.24.	Khoing Min Tun	D- Mon	5:00 pm	6:30 pm	1:30	1800	ferry
29.	21.11.24.	"	"	6:00 AM	8:00 AM	2	2400	"
30	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
31	22.11.24	"	"	6:00 AM	8:00 AM	2	2400	"
32	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
33.	26.11.24	"	"	6:00 AM	8:00 AM	2	2400	"
34	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
35.	27.11.24.	"	"	6:00 AM	8:00 AM	2	2400	"
36	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
Total Hours						15hr	18600K	
Total Amount						30min		

Requested by
 Sign :
 Name :
 (Requestor)

Approved by
 (DH)

Approved by
 (GM/AGM/COO)

Checked by
 (HR)

05-CHL-HRM-FRM-020-05



OVERTIME REQUEST FORM

BU/BR/DIV Name : MAC
Department Name : Logistics
Reason for Overtime : Form

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
37	28.11.24	Hloing Min Tun	J. MCA	6:00 am	8:00 am	2	2400	Form
38	u	u	u	5:00 pm	6:30 pm	1.30	1800	u
39	29.11.24	u	u	6:00 am	8:00 am	2	2400	u
40	u	u	u	5:00 pm	6:30 pm	1.30	1800	u
41	30.11.24	u	u	6:00 am	8:00 am	2	2400	u
42	u	u	u	5:00 pm	6:30 pm	1.30	1800	u
						Total Hours	10 hr	
						Total Amount	30 min	12,600Ks

Requested by
Sign:
Name: Hloing Min Tun
(Requestor)

Approved by
(DH)

Approved by
(GM/AGM/COO)

Checked by
(HR)