



# GENERAL EXPENSE CLAIM FORM



Company Name : - Chrysanthernum . wealth

Department Name : Administration

No.	Date	Name	Description	Amount	Remark
1	21.10.25	Naco Phaco Mae	Scor Sun ၀၇၀၀၀ (1000x50)	50000	
Total Amount				50000	

Request by: *[Signature]*  
 Name: Naco Phaco Mae (Requester)

Approved by: *[Signature]*  
 Name: Khaing Mye in Aye (Department Head)

Checked by: *[Signature]*  
 Name: Tiz Nwe Htoo (Related FNA/Corp FNA)

Approved by: *[Signature]*  
 Name: Maeng Maeng (OM/AGM/GM/BOH)

Approved by: \_\_\_\_\_  
 Name: \_\_\_\_\_ (ACOO/COO/MD/VCM)

02-BRM-FNA-FRM-007-01

