



No. 152, Hlaingtharya Industrial Zone (4)  
Min Gyi Mahat Min Street, Hlaingtharya, Yangon

## ADVANCE REQUEST FORM

Requestor Name : Moe Thazin	Budget Type : Include Budget
Department Name :	Payment Type : Advance Payment
Request Date : 2025-05-06	Advance Due Date : 05/31/2025
Payment Voucher : ADV-COP-2025-05-00011	Prepared By : COP_BudgetDataEntry
No	Superior Approved : F&AManagerCOP
Payment Method : Cash/Bank	By
Payment Amount : 25000.0	Last Approved By : COP_BudgetDataEntry
Currency : MMK	
Exchange Rate : 4,420.0	

No.	Description	Department	Request Amount	Remark
1	(Welfare) Birthday Cake ,(ADH-Marketing & Sale Support Department) Tin Lin Cho's Spouse.	Administration Department(COP)	25,000.00	

Expense Total                      25,000.00 K  
Amount Remain                    25,000.00 K

Note: \_\_\_\_\_

<p style="text-align: center;"><i>[Signature]</i></p> <p>Superior Check By</p> <p>Name : <i>[Signature]</i></p> <p>NRC No : <i>[Signature]</i></p> <p>Date : <i>6-5-25</i></p> <p>Remark : _____</p>	<p style="text-align: center;"><i>[Signature]</i></p> <p>F&amp;A</p> <p>Name : <i>[Signature]</i></p> <p>NRC No : <i>[Signature]</i></p> <p>Date : _____</p> <p>Remark : _____</p>	<p style="text-align: center;"><i>[Signature]</i></p> <p>GMAAGM</p> <p>Name : <i>[Signature]</i></p> <p>NRC No : _____</p> <p>Date : <i>7.5.25</i></p> <p>Remark : _____</p>	<p style="text-align: center;"><i>[Signature]</i></p> <p>COO</p> <p>Name : _____</p> <p>NRC No : _____</p> <p>Date : _____</p> <p>Remark : _____</p>
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