



GENERAL EXPENSE CLAIM FORM



Company Name : - Chrysanthemum-wealth

Department Name : - Administration

No.	Date	Name	Description	Amount	Remark
1	14.7.25	Naw Phaw Moe	ဒဂံ ဒဂံ ဆောက်ရေသန့် (1000x50)	50,000	
			မိုး ဆောက်ရေသန့် (1000x2)	2000	Recon ရေဘူး မရောက်ခင် ရေလျှော့ပိတ်ထား တောင်းပေးပါ
Total Amount				52,000/-	

Request by

Approved by

Checked by

Approved by

Approved by

Sign :

Name : Naw Phaw Moe
(Requester)

Thiri
(Department Head)

Tin Nwe Htoo
(Related FNA/Corp FNA)

Maing Maing
(OM/AGM/GM/BOH)

Ko Aye Mee Htoon
(ACOO/COO/MD/VCM)

02-BRM-FNA-FRM-007-01

