



Construction Equipment 2
 No – 589-592, Bo Aung Kyaw Street. New Tha Ka Ta (1) Hlaing Thar
 Yar Township .

Phone:
 Fax::
 Tax ID:



EXPENSE CLAIM VOUCHER

Number	: COP-PV-24100030
Date	: 2024-10-28
Payment Subtype	: claim
To	: Thandar Soe [COP-EM-0055]

Account	Currency	Status
Cash On Hand - MMK-COP	Myanmar Kyat	posted

Memo
 Cash Claim For Engine Head Repair charges -Engine Head Facing changing valve Guide ,Oil Seal, Valve Mounting degratation, valve Granding(repossess) Head Cleanind & Assembled charges for ZX70-5GX1U# 100612Problem-Engine Overhaul Issue-MMK-258,000/-Issue By Thandar Soe,

Purchase	Reference	Account Reference	Amount
Remarks:		Subtotal:	258,000.00
		Payment Amount:	258,000.00

Date : 28/10/24 Name/NRC No : pl8 see attach Signature : _____



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Purchase	Reference	Account Reference	Amount
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Remarks:	Subtotal:	258,000.00
	Payment Amount:	258,000.00

Date : 28/10/24 Name/NRC No : Thandar Soe Signature : 
91MakhaNacN7
- 207364

Date : 11/10/2024

BU/BR/Division : Common Purpose

Department : Service

Issue Amount : 258,000 / 0 Kyats / USD

Budget include (or) Not :

Yes Budgeted Title and Amount : Engine Head Repair Charges.
No Reasons for :

Required For: Engine Head Repair Charges - Engine Head Facing, Valve Changing, Guide, Oil Seal, Valve mounting degretation, valve Grinding (Repossess) Head Cleaning & Assembled Charges For ZX70-5Gx14 #100G12 Problem - Engine Overhaul Issue.
(၁) အဆင့်ဆင့်သက်ဆိုင်ရာတာဝန်ရှိသူကြီးမင်းများအားလုံး သေချာစွာစစ်ဆေးစစ်ဆေးတွက်ချက်ပြီးထားသော ငွေပမာဏဖြစ်ရပါမည်။
(The amount requested must be properly calculated, checked and verified by respective authorized person)
(၂) ထုတ်ယူငွေနှင့် ပတ်သက်၍ အမှားအယွင်း၊ လိမ်လည်မှု နှင့် အလွဲသုံးစားမှု တစ်စုံတစ်ရာ ရှိခဲ့ပါက၊ သက်ဆိုင်ရာ တာဝန်ရှိစစ်ဆေးအတည်ပြုသူက အပြည့် အဝ ပြန်လည်ရရှိအောင် တာဝန်ယူ ဆောင်ရွက်ပေးရမည်
(If there is errors, frauds or misappropriation, the authorized person must take full responsibility to recover the loss)

Request By: Thanchas Boe
Checked By: Sai Non KO
Checked By: Tine Zax Hlang Aung
Approved By: Zau Min Myat
Approved By: [Signature]

