



CASH ADVANCE CLEAR FORM

Date : 29/5/24
 BU/BR/Division : Remon / 280000-0000
 Department : Administration
 Advance Issue : 554820 Kyats/.....USD

| No | Issue Time | Date | Payment Voucher No | Amount | | Descriptions |
|---------------------------|------------------------------|---------|--------------------|--------|--------|---------------------|
| | | | | USD | Kyats | |
| 1 | 1 st Time Advance | 29/5/24 | 2024 151072 | | 554820 | Advance Clear |
| 2 | 2 nd Time Advance | | | | | medical Exp for |
| 3 | 3 rd Time Advance | | | | | Thet Naing Aung |
| Total Advance | | | | | 554820 | and Naing min Thant |
| Total Actual | | | | | 496820 | |
| Balance Refund/Additional | | | | | 58000 | |

Request By: *[Signature]*

Checked By: *[Signature]*

Checked By: *[Signature]*

Approved By: *[Signature]*

Approved By: *[Signature]*

Abao Ahi Mee yar

Zayin Min

Win Swe Win

Maeng Maeng

[Signature]
29/05/2024
A.M.H.Tour

Requester

Mgr/DH

Finance & Account

GM/AGM/COO

CMC

ACCIDENT CLAIM REQUEST FORM

| | |
|--|---|
| Request Date | 8.4.2024 |
| Employee Name | Thiet Aking Awng |
| ID No. | 13121 |
| Join Date | Nov 03, 2020 |
| Position | mechanic |
| Department | Production |
| Business | Remanufacturing |
| SSB Contribution | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Within Office Working Time or Not | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Injury Date | 3.04.2024 |
| Time of Injury | 14:00 |
| Injury Description | Production workshop ပုံစံ Power train jobs မြေပေါ်သို့ ဝင်ရင်း ခြေထောက် ဖြားထိုင်ရာ ဝင်ရင်း ဝင်ရင်း |
| Injury Leave From | 3.04.2024 |
| Injury Leave To | 12.04.2024 |
| Taken Leave Type | Medical Leave |
| Medical Claim Request Amount | 498620 |
| Medical Claim Approval Amount (ACHLO/CHLO Approval Amount) | -498620/- |

Remark : Please submit medical claim attach receipts.

| | | | | |
|------------------|-----------------|--------------------|-----------------|----------------|
| Requested by | Acknowledged by | Approved by | Checked by | Approved by |
| Sign : | Sign : | Sign : | Sign : | Sign : |
| Name : Htay Htay | Name : Aung Mye | Name : Mawng Mawng | Name : | Name : Chawng |
| Position : SH | Position : ADH | Position : GM | Position : | Position : |
| Date : 9.5.24 | Date : 9.5.24 | Date : 8/4/24 | Date : | Date : 16/5/24 |
| (Related HR) | (Manager) | (AGM/GM/COO) | (Corporate HRM) | (ACHLO/CHLO) |

52200

General Hospital

PAID

Ph : 01-9669311, 9569312, 9669313

Date : 04.01.2024 Time : 11:18 AM

You No : 010023-01-2024

Reg No : 24003858

PName : Ko Thi Pawng Aung

Age : 29 Years

Gender : Male

Doctor : Pawng Ye Kyaw

| Sl | Particulars | Qty | Amt |
|----------|------------------------------|-----|--------|
| 1 | Chest X-ray (Lat) | 1 | 18,000 |
| 2 | X-Ray Room Consultation Fees | 1 | 3,500 |
| Total | | | 21,500 |
| Paid | | | 21,500 |
| Discount | | | 0 |
| Balance | | | 0 |

အငွေရှင်းပြခြင်း

Cashier : TWP 01.01.24 11:20 AM

*** Thank You, Nice Day ***

General Hospital

ဆေးစစ်ခန်း၊ ဝန်ထမ်းဆောင်မှု
(ပ) ဝန်ထမ်းဆောင်ခန်း၊ မြန်မာ့ဝန်ထမ်း

PAID

Ph : 01-9669311, 9669312, 9669313

Date : 04/04/24 Time : 11:20 AM

YouNo : 0400270-04-2024

RegNo : 24003858

PName : Ko Thet Naing Aung

Age : 29 Years

Gender : Male

Doctor : Dr Aung Ye Kyaw

| Sl. | Particulars | Qty | Amt |
|-----|----------------------|-----|--------|
| 1. | HEs Ag (Qualitative) | 1 | 7,500 |
| 2. | HCV Ab (Qualitative) | 1 | 8,700 |
| 3. | HIV Ab (Qualitative) | 1 | 13,000 |
| 4. | Lab Other | 1 | 1,500 |

Total 30,700

Paid : 30,700

Discount : 0

Balance : 0

Cashier: TWP

04/04/24 11:21 AM

*** Thank You, Nice Day ***

HYAT THU KHA

Hyat Thu Kha (Medical Centre)

No.15, ... Road, Ward 2, Mayangone Township,

11067 Yangon

09 887263736, 09 791186178

hyatthamedical@gmail.com

Receipt No: 24-200-002323

03-Apr-24 11:17:59 AM

User: Ah Du Du

Order No: 15244

Patient:

Ko Thet Naing Aung

Address:

29

Code: 005451

Phone: 09989114945

Consultation (Dr SNH)

1 x MMK6,000

MMK6,000

Gloves small 100 size

1 x MMK300

MMK300

service

1 x MMK5,000

MMK5,000

Items count: 3

TOTAL:

MMK11,300

Cash:

MMK11,300

Paid amount:


MMK11,300



24-200-002323

Thank you

Welcome


MYAT THU KHA
MEDICAL CENTRE

Myat Thu Kha (Medical Centre)

No 151, Insein Road, Ward 2, Mayangone Township,

11061 Yangon

09 887203736, 09 795166178

myatthukhamedical@gmail.com

Receipt No : 24-200-002348

04-Apr-24 10:12:19 AM

User: Thiri ni

Order No.: 18069

Patient:

Ko Thet Naing Aung

Address:

29

Code: 005451

Phone: 09969114945

Clinic Book and Registration

1 Pcs x MMK1,200

MMK1,200

Consultation (Dr. AYE)

1 x MMK10,000

MMK10,000

service

1 x MMK5,000

MMK

Items count: 3

TOTAL:

6,

Cash:

Paid amount:



24-200-002348

Thank you

Thank you

— your blade is (Swan)

Welcome

MYAT THU KHA

Myat Thu Kha (Medical Centre)

No.151, Insein Road, Ward 2, Mayangone Township,

11061 Yangon

09 887203736, 09 795166178

myatthukhamedical@gmail.com

Receipt No.: 24-200-002578

12-Apr-24 9:00:15 AM

User: Thin ri

Order No.: 18309

Patient:

Ko Thet Naing Aung

Address:

29

Code: 005451

Phone: 09969114945

Consultation (Dr AYK)

1 x MMK13,000

MMK13,000

Dressing

1 x MMK12,000

MMK12,000

Protinet Nutritional

10 x MMK650

MMK6,500

service

1 x MMK5,000

MMK5,000

Items count: 4

TOTAL:

MMK36,500

Cash:

MMK36,500

Paid amount:

MMK36,500



24-200-002578

Thank you

Welcome

MYAT THU KHA
MEDICAL CENTRE

Myat Thu Kha (Medical Centre)

No.151 Insein Road, Ward 2, Mayangone Township,

11061 Yangon

09 687203736, 09 795166178

myatthu.kha.medical@gmail.com

Receipt No : 24-200-002463

08-Apr-24 10:19:07 AM

User: Ah Du Nu

Order No : 18188

Patient:

Ko Thet Naing Aung

Address:

29

Code: 005451

Phone: 09969114945

Consultation (Dr SSK)

1 x MMK6,000

MMK6,000

Dressing

1 x MMK12,000

MMK12,000

LORATIN-10 (Loratadine -10mg)

10 x MMK70

MMK700

service

1 x MMK5,000

MMK5,000

Items count: 4

TOTAL:

MMK23,700

Cash:

MMK23,700

Paid amount:

MMK23,700



24-200-002463

Thank you

Surgical Blade 15 (Swan)

(14) Parami Road. Between Pa
Yangon Myanmar. Tel;09-79311313



(16), Hlaing Township



) Hospital
ind U Po Hman Road
ip, Yangon
8088,09-793113156

ill
Date:05/04/202
Age:29

Diagnosi
Q

Patient's Name

Room No

Surgeon's Name

Surgeon

Anaesthetist

1st Assistant

2nd Assistant

Paediatrician

Total

၀.၇.၂၀၂၀
မောင်ဦးဝင်း

Dr Aung Ye

Charges (or
150000/-

၀.၇.၂၀၂၀
100000/-

Sex Male

Date 5.4.24.

foreign body removal

Operation

Received Signature

Given Signature

ပုဂံပေးခြင်း

MYA (Parami) Hospital

14, Between Parami and U Po Hman Road
Hlaing Township, Yangon
09-443236221, 09-963708088, 09-793113156

05/04/2024

18:41:31

Sale No:OPD04202400208

Registration No:R04202400107

Patient Name:KO THET NAING AUNG

Age:29

Doctor:ANING YE KYAW DR

Counter:OPD Counter

Cashier:Cashier

| Items | Qty | Price | Amount |
|---------------------|-----|-------|---------------|
| Cannula Insertion | 1 | 5,000 | 5,000 |
| Pharmacies | | | |
| Cannula 18 Green | 1 | 600 | 600 |
| Masocaine (1ml) inj | 1 | 300 | 300 |
| 1cc syringe | 1 | 200 | 200 |
| Tegaderm | 1 | 800 | 800 |
| Hansapiast | 5 | 100 | 500 |
| Theoclay 625 | 21 | 550 | 11,550 |
| Dazolec 500mg | 14 | 360 | 5,040 |
| Acedofenac | 6 | 90 | 540 |
| Omeprazole 20 Tab | 6 | 70 | 420 |
| Gotaday 5mg | 9 | 80 | 720 |
| Total Amount | | | 25,670 |
| Discount | | | 0 |
| Net Amount | | | 25,670 |

Thanks!

Goods sold are not returnable



MYA (Parami) Hospital
No.14, Between Parami and U Po Hman Road
Hlaing Township, Yangon
09-443236221, 09-963208088,09-793113156

OT Bill

Bill No:OT04202400021
Pt. Name:KO THET NAING AUNG
Address:
Remark:
Surgeon Name:AUNG YE KYAW DR

Date:05/04/2024
Age:29

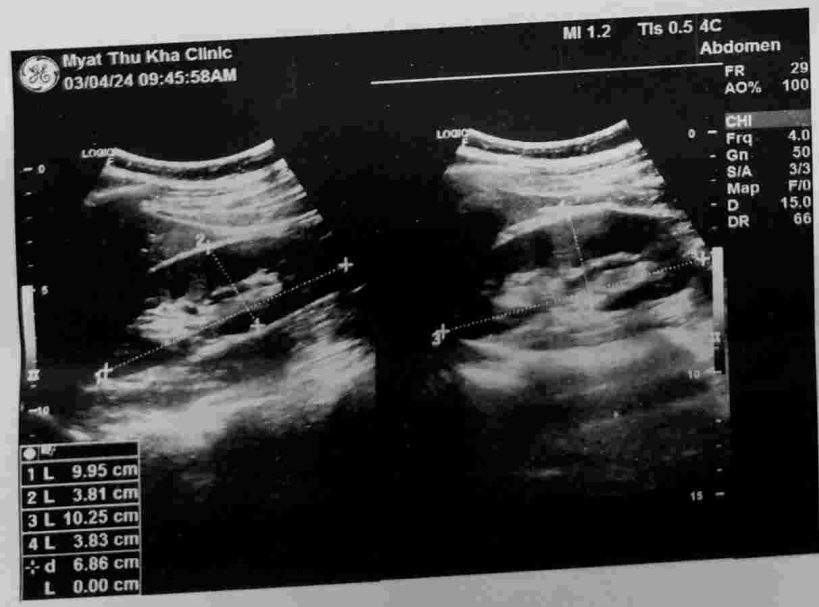
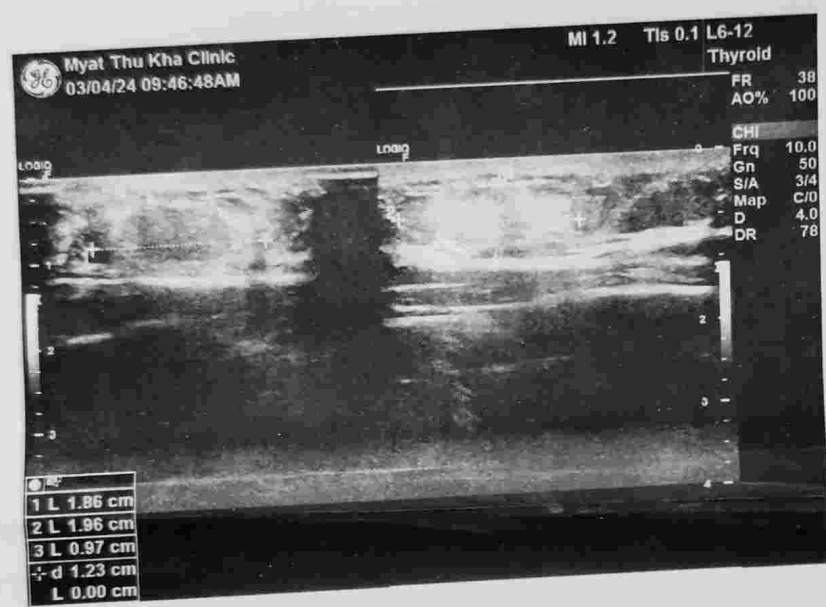
Gender:Male
Room:

Diagnosis:

| Particular | Qty | Price | Amount |
|--------------------------------|-----|---------|----------------|
| MINOR PACKAGE | 1 | 110,000 | 110,000 |
| OT General Service (Minor) | 1 | 10,000 | 10,000 |
| OT Accessories Fee (Minor) | 1 | 10,000 | 10,000 |
| Diathermy (Minor) | 1 | 5,000 | 5,000 |
| Pharmacies | 1 | 3,000 | 3,000 |
| Nylon 2/0 (40mm) | 10 | 400 | 4,000 |
| Jasocaine + Adrenaline inj 1ml | 1 | 250 | 250 |
| 20cc syringe | 1 | 2,500 | 2,500 |
| Safehand Glove 6.5" | 1 | 2,500 | 2,500 |
| Suri Glove 7.5 | 4 | 150 | 600 |
| Exam Glove | 1 | 1,500 | 1,500 |
| Surgical Blade 15 (Swan) | 1 | 100 | 100 |
| Needle 18 | 4 | 150 | 600 |
| Inno fix 1" | 1 | 1,500 | 1,500 |
| Easy Pad | | | 151,550 |
| Total Amount | | | 0 |
| Discount | | | 151,550 |
| Net Amount | | | |

Cashier

Cash Received From





MYAT THU KHA MEDICAL CENTRE

ဖုန်း: 151 ရန်ကုန် အင်းစိန်လမ်းမ ဦးရေခဲလမ်းနှင့်ကုလားကျောင်းမှတ်တိုင်ကြား | ward 2.မရမ်းကုန်းမြို့နယ် || 09-887203736

Ultrasound Report (abdomen)

| | | | |
|---------|-------------|-----------|----------|
| Name | ကိုသာဦးဒေါ် | Age/Sex | 29yrs, M |
| Re, No: | | Ward/Date | 3/4/24 |

Liver :Size normal Echogenicity mf
 :SOL mf sharp edge
 :Portal Vein normal Thrombus mf
 Gallbladder normal no stone
 CBD/Intra-hepatic duct normal no stone
 Pancreas mf enlarged no calc
 Spleen mf
 Right kidney :Size 9.9 x 5.8 cm Left kidney :size 10.1 x 5.8 cm
 Cortex mf Cortex mf
 Pelvicalyceal system; mf Pelvicalyceal system mf
 SOL/Stone mf SOL/Stone mf
 Bladder normal
 Prostate/Uterus mf enlarged no SOL
no hydronephrosis on both sides
 Lymph node mf Free fluid mf
 Others Indefinite hyperechoic area (1.8 x 6 mm x 0.9 mm)

Impression : at subcutaneous layer of lateral lower anterior chest. medial
post = acoustic shadow are 0.1 cm (1.8)
not concerning with intrathoracic
centric. underlying ribs appear normal
DR. P. P. P.



Thamine General Hospital

No. 1/2, Corner of Kyeik Wine Pagoda Road & Insein Road, Thamine Junction, (3)Quarter, Mayangone Township, Yangon.

Phone : 01-9669311, 01-9669312, 01-9669313, 09-765 489 284, 09 765 489 384, Email : thaminehospital@gmail.com

You No: 0400279042024

Date : 04/04/2024

Patient No : 24003858

Age/Sex: 29 Yr / M

Patient Name : Ko Thet Naing Aung

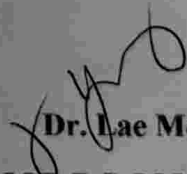
Bed No:

Doctor Name : DrAung Ye Kyaw

Issued : 04/04/2024

Microbiology

| <u>Test</u> | <u>Result</u> | <u>Unit</u> | <u>Reference</u> | <u>Remark</u> |
|---------------------|---------------|-------------|------------------|---------------|
| HBs Ag (Quali) | Non Reactive | Kang Hua | Screening Test | |
| HCV Ab (Quali) | Non Reactive | Intec | Screening Test | |
| HIV(1/2) Ab (Quali) | Non Reactive | Determine | Screening Test | |


Dr. Lae Moh Moh Htoo
M.B.B.S, M.Med.Sc(Pathology)

ဓာတ်ခွဲခန်းအဖြေများကို သက်ဆိုင်ရာဆရာဝန်ကြီးများနှင့်သာ ဆွေးနွေးပါရန်