



OVERTIME REQUEST FORM

BU/BR/DIV Name : **MAC**
 Department Name : **Logistics**
 Reason for Overtime : **ferry**

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
1.	1.10.24	HMT	D- Man	6:00 AM	8:00 AM	2	2400	ferry
2.	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
3.	2.10.24	"	"	6:00 AM	8:00 AM	2	2400	"
4.	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
5.	3.10.24	"	"	6:00 AM	8:00 AM	2	2400	"
6.	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
7.	4.10.24	"	"	6:00 AM	8:00 AM	2	2400	"
8.	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
9.	5.10.24	"	"	6:00 AM	8:00 AM	2	2400	"
Total Hours						16 hr	19200K	
Total Amount								

Requested by
 Sign:
 Name: **Hlaing Min Tun**
 (Requestor)

Approved by
 Sign:
 (DH)

Approved by
 (GM/AGM/COO)

Checked by
 Sign:
 (HR) **Aung Thiha Myo**

05-CHL-HRM-FRM-020-05



OVERTIME REQUEST FORM

BU/BR/DIV Name : **MAC**
 Department Name : **Logistics**
 Reason for Overtime : **ferry**

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
10.	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
11.	8.10.24	H.M.T	D- Man	6:00 AM	8:00 AM	2	2400	ferry
12.	"	"	"	6:00 pm	8:00 pm	3	3600	"
13.	8.10.24	"	"	6:00 AM	8:00 AM	2	2400	"
14.	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
15.	9.10.24	"	"	6:00 AM	8:00 AM	2	2400	"
16.	"	"	"	5:00 pm	6:30 pm	1:30	1800	"
17.	10.10.24	"	"	6:00 AM	8:00 AM	2	2400	"
18.	14.10.24	"	"	5:00 pm	6:30 pm	1:30	1800	"
Total Hours						17 hr	20400K	
Total Amount								

Requested by
 Sign:
 Name: **Hlaing Min Tun**
 (Requestor)

Approved by
 Sign:
 (DH)

Approved by
 (GM/AGM/COO)

Checked by
 Sign:
 (HR) **Aung Thiha Myo**

05-CHL-HRM-FRM-020-05



OVERTIME REQUEST FORM

BU/BR/DIV Name : *MAC*
 Department Name : *Logistics*
 Reason for Overtime : *Emergency*

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
19.	19.10.21	H. M. T	G. Men.	6:00 AM	8:00 AM	2	2400	<i>Emergency</i>
20.	"	"	"	5:00 PM	6:30 PM	1.30.	1800	"
21	21.10.21	H. M. T	"	6:00 AM	8:00 AM	2	2400	"
22	"	"	"	5:00 PM	6:30 PM	1.30.	1800	"
23.	22.10.21	H. M. T.	"	6:00 AM	8:00 AM	2	2400	"
24.	"	"	"	5:00 PM	6:30 PM	1.30	1800	"
25.	23.10.21	H. M. T	"	6:00 AM	8:00 AM	2	2400	"
26	"	"	"	5:00 PM	6:30 PM	1.30.	1800	"
27.	24.10.21	H. M. T	"	6:00 AM	8:00 AM	2	2400	"
Total Hours						16 hr	19200	
Total Amount								

Requested by
 Sign: *[Signature]*
 Name: *Hlaing Min Tun.*
 (Requestor)

Approved by
 Sign: *[Signature]*
 (DII)

Approved by
 (GM/AGM/COO)

Checked by
 Sign: *[Signature]*
 Aung Thiha Myo
 (HR)

05-CHL-HRM-FRM-020-05



OVERTIME REQUEST FORM

BU/BR/DIV Name : *MAC*
 Department Name : *Logistics*
 Reason for Overtime : *Emergency*

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
28.	"	"	"	5:00 PM	6:30 PM	1.30.	1800	"
29	25.10.21	H. M. T	G. Men.	6:00 AM	8:00 AM	2	2400	<i>Emergency</i>
30.	"	"	"	5:00 PM	6:30 PM	1.30.	1800	"
31	28.10.21	H. M. T	"	6:00 AM	8:00 AM	2	2400	"
32	"	"	"	5:00 PM	6:30 PM	1.30	1800	"
33	29.10.21	H. M. T	"	6:00 AM	8:00 AM	2	2400	"
34	"	"	"	5:00 PM	6:30 PM	1.30	1800	"
35	30.10.21	H. M. T	"	6:00 AM	8:00 AM	2	2400	"
36.	"	"	"	5:00 PM	6:30 PM	1.30	1800	"
Total Hours						15 hr	18600	
Total Amount						30 Min		

Requested by
 Sign: *[Signature]*
 Name: *Hlaing Min Tun.*
 (Requestor)

Approved by
 Sign: *[Signature]*
 (DII)

Approved by
 (GM/AGM/COO)

Checked by
 Sign: *[Signature]*
 Aung Thiha Myo
 (HR)

05-CHL-HRM-FRM-020-05



OVERTIME REQUEST FORM

BU/BR/DIV Name : **MAG**
 Department Name : **Logistics**
 Reason for Overtime : **feary**

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
37	31.10.24	H. M. T	9- Mon	6:00 pm	8:00 pm	2	2400	feary
38	"	"	"	5:00 pm	6:30 pm	1.30	1800	"
39	18.10.24	Sai Thee Am	9 Mon	5:00 pm	6:00 pm	1	1200	off 6 hrs
40	18.10.24	S. Bo Bo Ho	W. H	5:00 pm	6:00 pm	1	1200	
						Total Hours	5 hr	
						Total Amount	30 Mn	6600Ks

bunch
u8p5g.

Requested by
 Sign:
 Name: **Hloing Min Tun**
 (Requestor)

Approved by
 Sign:
 (DH)

Approved by
 (GM/AGM/COO)

Checked by
 Sign:
 Aung Thiha Myo
 (HR)

05-CHL-HRM-FRM-020-05



OVERTIME REQUEST FORM

BU/BR/DIV Name : **MAG**
 Department Name : **Logistics**
 Reason for Overtime : **loading**

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
1	26.10.24	H. M. T	9- Mon	8:00 am	5:00 pm	8	9600	po-098-090
2	"	K. W	W. H	"	"	8	9600	088
3	"	N. M. T	9- M	"	"	8	9600	Container
4	"	S. T. A	9- M	"	"	8	9600	
5	"	V. M.	W. H	"	"	8	9600	
6	"	A. M. T	W. H	"	"	8	9600	
7	"	S. B. B. H	W. H	"	"	8	9600	
						Total Hours	56 hr	
						Total Amount	67,200Ks	

Requested by
 Sign:
 Name: **PMT**
 (Requestor)

Approved by
 Sign:
 (DH)

Approved by
 (GM/AGM/COO)

Checked by
 Sign:
 Aung Thiha Myo
 (HR)

05-CHL-HRM-FRM-020-05