

GENERAL EXPENSE CLAIM FORM



Company Name : - Chrysantherium-wealth

Department Name : - Administration

No.	Date	Name	Description	Amount	Remark
1	25.3.25	Nao Phaw Mae	ငွေ (4000 x 5) ၁၁၀၉(1000x6) အဖုဖု + ကုန်ပစ္စည်း ကုန်ပစ္စည်း ကုန်ပစ္စည်း	20000 6000 2000 20000 2500	
Total Amount				50500	

Request by

Sign : *[Signature]*

Approved by

Checked by

Approved by

Approved by

Name : Nao Phaw Mae
(Requester)
Khaing Mye Aye
(Department Head)
Tin Uwe Htoo
(Related FNA/Corp FNA)

Meng Meng
(OM/AGM/GM/BOH)

Ko Aye Min Htin
(ACOO/COO/MID/VCN)