

**EXPENSE CLAIM VOUCHER**

Number	: COP-PV-24080038
Date	: 2024-08-14
Payment Subtype	: claim
To	: Thandar Soe [COP-EM-0055]

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

emo  
sh Claim For Operator Charges for Zx280lc-5G\*1U#410010(unloading ) Charges as repair purpose from service department ,(Repossessed Machine )MMK-15,000/-

urchase	Reference	Account Reference	Amount
marks:		Subtotal:	15,000.00
		Payment Amount:	15,000.00

: 14.8 2024 Name/NRC No : Nam Tin Wei Hlaing Signature : 31174 M

Date : 8.10.8/2024  
 BU/BR/Division : Common Purpose  
 Department : Service  
 Issue Amount : 15,000.1 Kyats/ USD

Budget include (or) Not :

Yes  Budgeted Title and Amount : Operator charges.  
 No  Reasons for :

Required For:


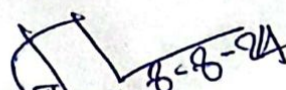
Operator Charges For ZX280LC-5Gx1U # 410010 (unloading) charges as repair purpose from service department. < Repossessed Machine >

မှတ်ချက်။

(၁) အဆင့်ဆင့်သက်ဆိုင်ရာတာဝန်ရှိလူကြီးမင်းများအားလုံး သေချာစွာစစ်ဆေး၊ တွက်ချက်ပြီးထားသော 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	Checked By	Checked By	Approved By	Approved By
				
<u>Theandar Soe</u>	<u>Sai Noh Kh</u>	<u>Tin Zos Hlaing</u>	<u>Aung Thu Win</u>	
Requester	Mgr/DH	Finance & Account	GM/AGM/COO	CMC/CEO/Chairwoman

*Handwritten notes and signatures at the bottom center of the page.*

Operator Name : U Mine Zaw

Post :

Business Unit : COP

Date :

Saleman :

: 9/BakaNacN) - 011230 109 - 69145023

No	Customer	Model	Serial No	Amount	Time		Remark
					Start	Finish	
1.	COP	ZX280LG-5G	410010	15000	9:00AM	10:00AM	<undocking>
<b>Grand Total</b>				15,000			

Prepared By

Acknowledged By

Approved By

Sign :

Name : Thandar Soe ✓

Sign :

Name : Sai Nare Ko

Sign :

Name : Aung Thea Win


02-COP-SRV-FRM-040-00


# GENERAL EXPENSE CLAIM FORM


Company Name : Common Purpose


Department Name : Service

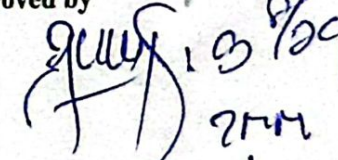
No.	Date	Name	Description	Amount	Remark
1	5/08/24	U Min Zaw	Machine Unloading	15,000	
Total Amount				15,000	

Requested by  
Sign :   
Name : Theandax Soe  
(Requester)

Approved by  
  
Name : Sai Nare Ko  
(Department Head)

Checked by  
  
Name : Tin Zaw Hlaing  
(Related FNA/Corp FNA)

Approved by  
  
Name : Aung The Win  
(OM/AGM/GM)

Approved by  
  
Name : Zaw Min Myat  
(ACOO/COO/MD/VCM)