

## GENERAL EXPENSE CLAIM FORM



Company Name : Win strategic CO, Ltd.  
 Department Name : Administration.

No.	Date	Name	Description	Amount	Remark
1.	27.3.25	Moe Zaw	Drinking Water (25) ဘူး	30000 l.	09-400034270
2.	31.3.25	Moe Zaw	Drinking Water (10) ဘူး	12000 l.	09-400034270.
Total Amount				42000 l.	

Requested by	Approved by	Checked by	Approved by	Approved by
Sign :				
Name : Moe Zaw (Requester)	Moe Zaw (Department Head)	Moe Zaw (Related FNA/Corp FNA)	Moe Zaw (OM/AGM/GM)	Moe Zaw (ACOO/COO/MD/VCM)







No. 592, 2nd Floor,  
De La Salle Street, Yangon-Patheingyi Highway Road, Hlaingtharyar, Yangon



## ADVANCE CLEAR VOUCHER

Requestor Name : SU THET MAR	Budget Type : Include Budget
Department Name:	Payment Type : Advance Clearing
Request Date : 2025-05-13	Advance No : ADV-CE1-2025-03-00007
Payment Voucher : AC-CE1-2025-05-00004	Prepared By : CE1_BudgetDataEntry
No	Superior Approved : CE1_BudgetDataEntry
Payment Method : Cash/Bank	By
Payment Amount : 42000.0	Last Approved By : Moh Moh Khaing
Currency : MMK	
Exchange Rate : 4,430.0	

No.	Description	Department	Request Amount	Remark
1	Purified Drinking Water	Administration(CE1)	30,000.00	
2	Purified Drinking Water	Administration(CE1)	12,000.00	

Expense Total	42,000.00 K ✓
Advance Total	50,000.00 K
Refund	8,000.00 K

Note: .....

<p style="text-align: center;"><i>Jh</i></p> <p>Superior Check By</p> <p>Name : <u>Saw Htet Hlaing</u></p> <p>NRC No : <u>111 Ratha To CM 1216</u></p> <p>Date : <u>30 May 25</u></p> <p>Remark : .....</p>	<p style="text-align: center;"><i>F&amp;A</i></p> <p>Prepared By</p> <p>Name : <u>Moh Moh Khaing</u></p> <p>NRC No : .....</p> <p>Date : <u>20.5.25</u></p> <p>Remark : .....</p>	<p style="text-align: center;"><i>llli</i></p> <p>GM/AGM</p> <p>Name : <u>Min Thata</u></p> <p>NRC No : .....</p> <p>Date : .....</p> <p>Remark : .....</p>
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*COO*

21/05/25

*Min Thata*