



# OVERTIME REQUEST FORM

BU/BR/DIV Name : IS

Department Name : Sale and Marketing (MC)

Reason for Overtime : YWB Christmas Event

No.	Date	Name	Position Level	Time		Hours	Amount	Remark
				From	To			
1.	21.12.24	Pyae Soe Min	licenses staff	8:00AM	8:00PM	11 hrs	13,200	YWB Event
2.	21.12.24	Arkar Moe Myint	Salesman	8:00AM	8:00PM	11 hrs	13,200	YWB Event
3.	22.12.24	Arkar Moe Myint	Salesman	8:00AM	8:00 PM	11 hrs	13,200	YWB Event
						<b>Total Hours</b>	33hrs	
						<b>Total Amount</b>	39,600	

Requested by

Sign :

Name :

*Thiri Soe*  
Thiri Soe  
(Requestor)

Approved by

*Payo Ko Ko*  
Payo Ko Ko  
(DH)

Approved by

*[Signature]*  
(GM/AGM/COO)

Checked by

*[Signature]*  
(HR)

05-CHL-HRM-FRM-020-05





