



CASH ADVANCE CLEAR FORM

ate :
U/BR/Division : Charisanthemum Wealth Co, Ltd
Department : Administration
Advance Issue : 60000/- Kyats/.....USD

No	Issue Time	Date	Payment Voucher No	Amount		Descriptions
				USD	Kyats	
1	1 st Time Advance	2016124	UGG-REM-2024-06-00048		60000	Adv - Clear To Cleaning
2	2 nd Time Advance					Car lower part
3	3 rd Time Advance					6 units @ 10000/-
Total Advance					60000/-	
Total Actual					35500/-	
Balance Refund/Additional					24500/-	

Request By : [Signature]
Checked By : [Signature]
Checked By : [Signature]
Approved By : [Signature]
Approved By :
Requester : Abi Mee yar
Mgr/DH : Zayar Lin
Finance & Account : Tin Nwe Htwe
GM/AGM/COO : Maeng Maeng
CMC :

ငွေလက်ငင်းပြတ်ပိုင်း

Chayanthemum-wealth နေ့စွဲ 24.6.2024

အမည် _____

No. _____

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လက်မှတ် ၃၂

စုစုပေါင်း

6000

ငွေလက်ငင်းပြတ်ပိုင်း

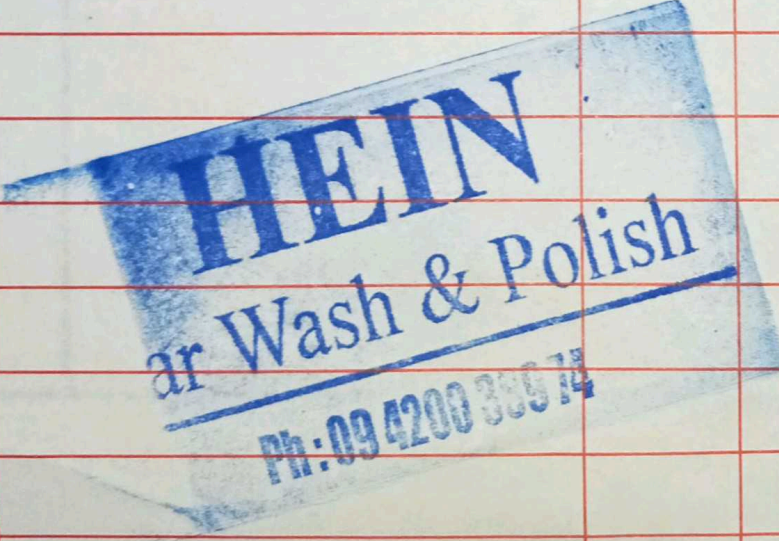
၂၀၂၄-၂၀၂၅ ခုနှစ် Chrysanthemum + wealth နံရံ ၂၁.၆.၂၀၂၄

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ဝယ်ပြီးပစ္စည်းစစ်ဆေးယူပါ

လက်မှတ် *[Signature]*

စုစုပေါင်း: ၆၀၀၀

lite

AUTOSERVICES

NO.181/A, YANGON-PATHEIN HIGH WAY ROAD
HLAING THARYAR T/S, YANGON, MYANMAR.
TEL: 09 259277771, 09 977905987, 09 977905988.

INVOICE

NAME : 3J-6814
ADDRESS : choysonthemant-wealth
PHONE :

INVOICE NO. 8348
DATE : 124. 6. 2024
PAY BY :

NO.	DESCRIPTION	QUANTITY	PRICE	AMOUNT
	၆၇၆၀၀ ပိုငွေ			5000
AMOUNT				5000
DISCOUNT				-
BALANCE				5000

" THANKS "

.....
Customer's Signature

.....
Authorized Signature



150361

Sales Invoice

Branch/ Business Unit : Reman
 Customer :
 Contact Person : Ko Sai, Lao Khan
 Company Name : Chay Sarthe mcam. wealth
 NRC No : 202406097
 Address : 26.6.24
 Phone No. : 41-9370
 : Bighorn

Voucher No : 13438
 Invoice No : 150361 (WS/G/24)
 Invoice Date : 26.6.24
 Saleman :
 Sale Type : Credit / Cash [✓] AC to AC
 Currency : MTK

No	BU	Description	Part No	Qty	Price / Unit	Total Amt	Remark
1.		leather polish		0.5	3500	3500	
2		Car wash & Diesel spray		1	10000	10000	
						}	
Total Sale AMT for Spare Parts & Service Charges						18500/-	13,500/-

Please note that by accepting & signing this one month credit sale invoice, you understand and agree that we may charge (3%) penalty on overdue amount.

Prepared By :	Checked By :	Approved By :	Customer By :
Sign :	Sign :	Sign :	Sign :
Name : INLMH	Name : HMO	Name : HMO	Name : New Ah Maw
Dept : WS	Dept : WS	Dept : WS	Company : Reman
Post : SA	Post : DH	Post : DH	Post : DH

