



### ADVANCE REQUEST FORM

Requestor Name : MIN THET KYAW ZIN      Budget Type : Include Budget  
 Department Name:                              Payment Type : Advance Payment  
 Payment Date : 2024-09-07                  Advance Due Date : 09/17/2024  
 Payment Voucher : ADV-BMC-2024-09-00006      Prepared By : BMC Budget Requestor  
 No    Superior Approved : BMC F&A Manager  
 Payment Method : Cash Bank                  By  
 Payment Amount : \$5000.0                      Last Approved By : Aye Min Htun  
 Currency : MMK  
 Exchange Rate : 5,700.0

No.	Description	Department	Request Amount	Remark
1	Cash advanced request YCDC charges for sep'24	Admin Department(BMC)	\$5,000.00	

Expense Total                      85,000.00 K  
 Amount Remain                    85,000.00 K

Note:

Superior Check By: [Signature]      FSA      GM/AGM      ACOO

Name : Chae Nee Lwin      Name : Zu Ka Aye      Name : \_\_\_\_\_      Name : \_\_\_\_\_  
 NRC No : 01626130      NRC No : 219755      NRC No : \_\_\_\_\_      NRC No : \_\_\_\_\_  
 Date : 9-9-24      Date : 9.9.24      Date : \_\_\_\_\_      Date : \_\_\_\_\_  
 Remark : \_\_\_\_\_      Remark : \_\_\_\_\_      Remark : \_\_\_\_\_      Remark : \_\_\_\_\_

[Handwritten Signature]  
 110729  
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