chrysanthemum wealth

GENERAL EXPENSE CLAIM FORM

Member of UMG

Company Name :

Department Name :

No.	Date	Name	Description	Amount	Remark
1	21.10.24	Naw Phaw Mue	ခြေ ခြေ တောက်ရောင်. (35 pcs)	31500	
	25.10.24	"	ခြေ ခြေ တောက်ရောင် (35 pcs)	31500	
Total Amount				63,000/-	

Request by	Approved by	Checked by	Approved by	Approved by
Sign :				
Name : Naw Phaw Mue				
(Requester)	(Department Head)	(Related FNA/Corp FNA)	(OM/AGM/GM/BOH)	(ACOO/COO/MD/VCM)

02-BRM-FNA-FRM-007-01

CamScanner