



GENERAL EXPENSE CLAIM FORM



Company Name : Win strategic.

Department Name : Administration.

No.	Date	Name	Description	Amount	Remark
1.	5.5.25	Moe Zaw	Drinking water	12000 l.	
2.	12.5.25	Moe Zaw	Drinking water	12000 l.	
3.	17.5.25	Moe Zaw	Drinking water	12000 l.	
4.	29.5.25	Moe Zaw	Drinking water	12000 l.	
Total Amount				48000 l.	

Requested by
Sign :

Approved by

Checked by

SNH
416125

Approved by

Min Thu Ya
(OM/AGM/GM)

Approved by

05/06/25
Aung Mye Aung Mye
(ACOO/COO/MD/VCM)

Name : Moe Zaw (Requester)
Moe Zaw (Department Head)
SNH (Related FNA/Corp FNA)

02-CE1-FNA-FRM-001-01

ADVANCE CLEAR VOUCHER

Requestor Name : Saw Htet Htet Hlaing	Budget Type : Include Budget
Department Name:	Payment Type : Advance Clearing
Request Date : 2025-06-04	Advance No : ADV-CE1-2025-05-00007
Payment Voucher : AC-CE1-2025-06-00002	Prepared By : CE1_BudgetDataEntry
No	Superior Approved : CE1_BudgetDataEntry
Payment Method : Cash/Bank	By
Payment Amount : 48000.0	Last Approved By : Saw Nan Hlaing
Currency : MMK	
Exchange Rate : 4,440.0	

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

Expense Total	48,000.00 K
Advance Total	50,000.00 K
Refund	2,000.00 K

Note:

<p><i>[Signature]</i> Superior Check By Name : <u>Saw Htet Hlaing</u> NRC No : <u>U. Ba Tha Tean</u> Date : <u>04-06-25</u> Remark :</p>	<p><i>[Signature]</i> F&A Name : <u>Saw Nan Hlaing</u> NRC No : <u>U. Ba Tha Tean</u> Date : <u>4.6.25</u> Remark :</p>	<p><i>[Signature]</i> GM/AGM Name : <u>Min Thu Ya</u> NRC No : Date : Remark :</p>	<p><i>[Signature]</i> COO Name : NRC No : Date : Remark :</p>
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[Signature]
 05/06/2025
 Annika

Name :
 NRC No :
 Date :
 Remark :