


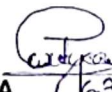

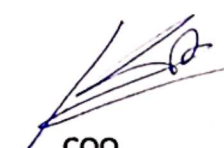
## ADVANCE REQUEST FORM

Requestor Name : Mya Kay Khaing	Budget Type : Include Budget
Department Name :	Payment Type : Advance Payment
Payment Date :	Advance Due Date : 03/31/2025
Payment Voucher : ADV-BTF-2025-03-00009	Prepared By : Mya Kay Khaing
No	Superior Approved : Myat Hsu Mon
Payment Method : Cash/Bank	By
Payment Amount : 50000.0	Last Approved By : Arker Lin
Currency : MMK	
Exchange Rate : 4,500.0	

No.	Description	Department	Request Amount	Remark
1	Employee Welfare charges for Mar'25	Administration Department (BTF)	50,000.00	March Borns Birthday

Expense Total	50,000.00 K
Amount Remain	50,000.00 K

Note: \_\_\_\_\_

 <b>Superior Check By</b>	 <b>F&amp;A</b>	 <b>GM/AGM</b>	 <b>COO</b>
Name : Myat Hsu Mon	Name : Arker Lin	Name : Arker Lin	Name : Chy Zin
NRC No : 1414APANA-CAD12.7355	NRC No : 1216PITK-2067913	NRC No : 1414APANA-CAD12.7355	NRC No : 1414APANA-CAD12.7355
Date : 6/3/25	Date : 6.3.2025	Date : 6.3.25	Date : 6/3/25
Remark : .....	Remark : .....	Remark : .....	Remark : .....