



OVERTIME REQUEST FORM

BU/BR/DIV Name : CE-5
 Department Name : service
 Reason for Overtime : machine Repair

No.	Date	Name	Position Level	Time		Hours	Amount	Remark	
				From	To				
1	23.11.2024	Yee Myo Min	SH	8:30 AM	6:30 PM	9:00	10800	machine	
2	"	Aung Khin The	mechanic	8:30 AM	6:30 PM	9:00	10800	repair of	
3	"	Thein Aung	"	8:30 AM	6:30 PM	9:00	10800	CO P yard	
4	23.11.2024	Kywe Khin Oo	"	8:30 AM	6:30 PM	9:00	10800	mf 920*	
				(1 hr 30 min: 07:30 to 09:00 hrs Break)				11:30 AM 07422	
						Total Hours	36 hrs	43200	
						Total Amount			

Requested by
 Sign:
 Name: Nan Tin Wai Hlaing
 (Requestor)

Approved by
 Sign:
 Name: Tin San Oo
 (DR)

Approved by
 Sign:
 Name: Aung The Win
 (GM/AGM/COO)

Checked by
 Sign:
 Name: Moe Thazin
 (HR)

common purpose

GENERAL EXPENSE CLAIM FORM



Company Name : CE-S

Department Name : service

No.	Date	Name	Description	Amount	Remark
1	23.11.2024	Yee Myo Min	OT charges for machine	10800	
		Ang Khut Thu	repair at cop yard	10800	
		Thissa Aung	MF 220 # 14 36.9102422	10800	
		Kyaw Khaing Ch	"	10800	
2	25.11.2024	Yee Myo Min	OT charges for machine	9600	
		Kyaw Khaing Ch	repair at Cop yard 25/11/24	9600	
Total Amount				62400	-

Requested by

Approved by

Checked by

Approved by

Approved by

Sign :

Name : Wan Tin Wei

(Requester)

Tin Zee Hlaing

(Department Head)

Tin Zee Hlaing

(Related FNA/Corp FNA)

Aung Thee Win

(OM/AGM/GM)

(ACOO/COO/MD/VCM)