

No. 152 Hlaingtharya Industrial Zone (4)
Min Gyi Mahar Min Street, Hlaingtharya, Yangon

CLAIM REQUEST FORM

Requestor Name : Thandar Soe(2)
Department Name :
Request Date : 2025-04-07
Payment Voucher : EX-COP-2025-04-00005
No
Payment Method : Cash/Bank
Payment Amount : 60000.0
Currency : MMK
Exchange Rate : 4,460.0

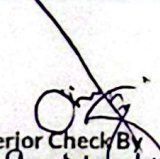
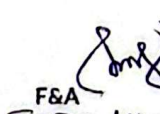

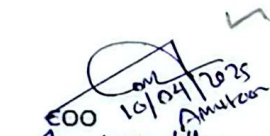
Budget Type : Include Budget
Payment Type : Claim Payment
Prepared By : COP_BudgetDataEntry
Superior Approved : F&A Manager COP
By
Last Approved By : COP_BudgetDataEntry

No.	Description	Department	Request Amount	Remark
1	Machine loading charges for ZX 210LCH-5G*3U#90484-Cu Name-U Ko Ko Lwin,90485-Cu Name-U San Lwin Maung,90043-Cu Name-U Kyaw Lin Aung,ZX350LCH-5G*1U#53600-Cu Name-Shwe Inn Wa Co.Ltd., Operator Charges From Service Department. Issued by- Thandar Soe, Issued Amount-60,000MMK.	Service Department(COP)	60,000.00	Machine loading charges for ZX 210LCH-5G*3U#90484-Cu Name-U Ko Ko Lwin,90485-Cu Name-U San Lwin Maung,90043-Cu Name-U Kyaw Lin Aung,ZX350LCH-5G*1U#53600-Cu Name-Shwe Inn Wa Co.Ltd., Operator Charges From Service Department. Issued by- Thandar Soe, Issued Amount-60,000MMK.

Expense Total
Additional/Refund

60,000.00 K ✓

Note: _____

<p>Superior Check/By  Name : Sai Noh Ko NRC No : _____ Date : 9-4-25 Remark : _____</p>	<p>F&A  Name : Lin Za Hing NRC No : _____ Date : 9-4-25 Remark : _____</p>	<p>GM/ASM  Name : Aung Thuan NRC No : _____ Date : 9-4-25 Remark : _____</p>	<p>EOO 16/04/2025 Amutean  Name : Aye Min Hlon NRC No : _____ Date : 9-4-25 Remark : _____</p>
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OPERATOR CHARGES

Operator Name : **U Min Zaw**
 : 9 (Sakana CN) 011230, 09.691450613
 Business Unit : **Common Purpose**

Date : **7.4.25**
 Saleman :


No	Customer	Model	Serial No	Amount	Time		Remark
					Start	Finish	
1.	U Ko th Kein	2x2101CH-SG	90484	15,000	9:00 AM	10:00 AM	Machine Delivery For
2.	Shwe Inn Wa cold	2x3501CH-SG	53600	15,000	10:00 AM	11:00 AM	2x2101CH-SGx 3CL# 90484, 90485,
3.	San Kein Macing	2x2101CH-SG	90485	15,000	1:00 PM	2:00 PM	90043, 2x3501CH-SG 1CL# 53600 (CL)
4.	Kyaco Lin Aung	2x2101CH-SG	90043	15,000	2:00 PM	3:00 PM	
Grand Total				60,000			


Prepared By

Acknowledged By

Approved By

Sign : 
 Name : **Thandaw Soe**

Sign : 
 Name : **Sai Nan Ko**

Sign : 
 Name : **Aung The Win**
 02-COP-SRV-FRM-040-00



GENERAL EXPENSE CLAIM FORM



Company Name : Common Purpose

Department Name : Service

No.	Date	Name	Description	Amount	Remark
1.	25.2.25	90484	Machine Delivery For 2x210 LCH-SG (CL)	15,000	Machine Delivery
2.	27.2.25	53600	Machine Delivery For 2x350 LCH-SG (CL)	15,000	For 2x210 LCH-SG x 3ce
3.	4.3.25	90485	Machine Delivery For 2x210 LCH-SG (CL)	15,000	#90484, 90485,
4.	28.3.25	90043	Machine Delivery For 2x210 LCH-SG (CL)	15,000	90043, 2x350 LCH-SG
					x 1U # 53600
					(loading)
Total Amount				60,000	✓

Requested by

Approved by

Checked by

Approved by

Approved by

Sign :

Name : Thandee See

Sei Nam Ko

Tin Zee Hlaing

Aung Tha Win

Aye Min Htoon

(Requester)

(Department Head)

(Related FNA/Corp FNA)

(OM/AGM/GM)

(ACOO/COO/MD/VCM)