



OVERTIME REQUEST FORM

BU/BR/DIV Name : ASS
 Department Name : Service
 Reason for Overtime : 15.11.24 ~ 30.11.24

No.	Date	Name	Position Level	Time		Hours	Amount	Remark	
				From	To				
	19.11.24	Peggy Sone Nony	✓	5:00pm	6:00pm	1 hr	1800	M/c delivery	
	21.11.24	Nxuy Hten Win	✓	5:00pm	6:30pm	1:30h	1800	M/c inspection	
	"	Peggy Sone Nony	✓	"	"	1:30h	1800	accessories	
	"	Peggy Sone Nony	✓	"	"	1:30h	1800	mounting	
	23.11.24	Myant Mbe Ang	✓	8:30am	4:00pm	7 hr	8400	Machine	
	"	Nxuy Hten Win	✓	"	"	"	8400	inspection	
	"	Peggy Sone Nony	✓	"	"	"	8400	"	
	"	Peggy Sone Nony	✓	"	"	"	8400	"	
Total Hours								40800	
Total Amount									

Requested by
 Sign :
 Name : Ngyen Ngyen
 (Requestor)

Approved by

 (DH)

Approved by
 (GM/AGM/COO)

Checked by

 Zin Mar Win
 (HR)

05-CHL-HRM-FRM-020-05



OVERTIME REQUEST FORM

BU/BR/DIV Name : ASS
 Department Name : Service
 Reason for Overtime : 15.11.24 ~ 30.11.24

No.	Date	Name	Position Level	Time		Hours	Amount	Remark	
				From	To				
	27.11.24	Peggy Sone Nony	✓	5:00pm	6:00pm	1 hr	1800	Machine delivery	
	28.11.24	Nxuy Hten Win	✓	5:00pm	6:00pm	1 hr	1800	Machine line repair	
	30.11.24	Peggy Sone Nony	✓	5:00pm	6:30pm	1:30h	1800	Machine test	
	"	Ys Wai Yan	✓	"	"	"	1800	"	
Total Hours								6000	
Total Amount									

Requested by
 Sign :
 Name : Ngyen Ngyen
 (Requestor)

Approved by

 (DH)

Approved by
 (GM/AGM/COO)

Checked by

 Zin Mar Win
 (HR)

05-CHL-HRM-FRM-020-05

