

CLAIM PAYMENT FORM

Requestor Name : Moe Thazin
 Department Name :
 Payment Date : 2025-05-27
 Payment Voucher : EX-COP-2025-05-00004
 No
 Payment Method : Cash/Bank
 Payment Amount : 15000000.0
 Currency : MMK
 Exchange Rate : 4,440.0

Budget Type : Include Budget
 Payment Type : Claim Payment
 Prepared By : COP_BudgetDataEntry
 Superior Approved : F&AManagerCOP
 By
 Last Approved By : CFD Cashier

No.	Description	Department	Paid Amount	Remark
1	(Claim)Office Building Rental For CE2 = Ks 150L for May'25	Administration Department(COP)	15,000,000.00	

Expense Total 15,000,000.00 K
 Additional/Refund

Note: _____

Paid _____

Description: _____

Name :

Paid By

Hlaing
Su Su Hlaing

NRC No :

Date :

27/05/25

Name :

NRC No :

Date :

Received By

gld.
Thadamin The
16 (M. Manber) 109928
28.5.25.

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

CLAIM REQUEST FORM


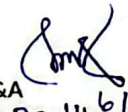


Requestor Name : Moe Thazin
 Department Name :
 Request Date : 2025-05-06
 Payment Voucher : EX-COP-2025-05-00004
 No
 Payment Method : Cash/Bank
 Payment Amount : 15000000.0
 Currency : MMK
 Exchange Rate : 4,420.0

Budget Type : Include Budget
 Payment Type : Claim Payment
 Prepared By : COP_BudgetDataEntry
 Superior Approved : F&AManagerCOP
 By
 Last Approved By :

No.	Description	Department	Request Amount	Remark
1	(Claim)Office Building Rental For CE2 = Ks 150L for May'25	Administration Department(COP)	15,000,000.00	

Expense Total 15,000,000.00 K
 Additional/Refund

Note:

 Superior Check By		 F&A	 GM/AGM	 COP
Name : <u>Fi Fi Nko</u>	Name : <u>Min Za Hlaing</u>	Name :	Name :	Name :
NRC No : <u>11/AGP(M) 2024</u>	NRC No :	NRC No :	NRC No :	NRC No :
Date : <u>6.5.25</u>	Date :	Date :	Date :	Date :
Remark :	Remark :	Remark :	Remark :	Remark :



UMG Head Quarter

592, Bo Aung Kyaw Street, Yangon-Pathein Highway Road, Hlaingtharyar Township, Yangon, Myanmar. Yangon

Tel :

Fax:

RECEIVE VOUCHER

Voucher No. :HQT-RV-2025-05-0794

Currency :MMK

Voucher Date :2025-05-27

From :

No	Description	Purpose	Subtotal
1	Received from CE.2 BU to Ho Cash, Ks-15,000,000/- (For May'25 Office Rental) Issue By- Su Su Hlaing (CE.2)	Prepaid expenses - Others-HQ	15000000.00

Total 15,000,000.00

Total in Words : _____

Journal Remarks : Received from CE.2 BU to Ho Cash, Ks-15,000,000/- (For May'25 Office Rental) Issue By- Su Su Hlaing (CE 2)

Date : 27/05/25 Name/NRC No : Su Su Hlaing Signature : [Signature]

Cashier [Signature] Signature : [Signature]