

ADVANCE REQUEST FORM

Requestor Name : Su Su Khaing
 Department Name :
 Payment Date :
 Payment Voucher : ADV-REM-2025-01-00041
 No
 Payment Method : Cash/Bank
 Payment Amount : 330000.0
 Currency : MMK
 Exchange Rate : 4,630.0

Budget Type : Include Budget
 Payment Type : Advance Payment
 Advance Due Date :
 Prepared By : REM_BudgetDataEntry
 Superior Approved : REM_SRVADH
 By
 Last Approved By : REM_SRVADH

No.	Description	Department	Request Amount	Remark
1	Advance Payment for repair of cab mirror (SE290,000027).MMK.Adv-330,000/-	Production (REM)	330,000.00	

Expense Total : 330,000.00 K
 Amount Remain : 330,000.00 K

Note:

(Handwritten signatures and initials)

Superior Check By		F&A		GM/AGM		COO	
Name : <u>Aj Kyaw The</u>	Name : <u>Tin Aye Htoo</u>	Name : <u>Naung Myung</u>	Name : <u>Sir Aye Min Htoon</u>				
NRC No : <u>7/2025/110371</u>	NRC No : <u>12/2025/96</u>	NRC No : _____	NRC No : _____				
Date : _____	Date : <u>01.05.25</u>	Date : _____	Date : <u>14.1.25</u>				
Remark : _____	Remark : <u>13.1.25</u>	Remark : _____	Remark : <u>TA approved</u>				