

ADVANCE REQUEST FORM

Requestor Name : MIN THET KYAW ZIN	Budget Type : Include Budget
Department Name:	Payment Type : Advance Payment
Payment Date : 2024-09-07	Advance Due Date : 09/17/2024
Payment Voucher : ADV-IS-2024-09-00002	Prepared By : IS BU Budget Requestor
No	Superior Approved : IS BU F&A DH
Payment Method : Cash/Bank	By
Payment Amount : 60000.0	Last Approved By : Aye Min Htun
Currency : MMK	
Exchange Rate : 5,700.0	

No.	Description	Department	Request Amount	Remark
1	Cash advanced request for Cycle repair	Administration (IS)	60,000.00	

Expense Total 60,000.00 K
Amount Remain 60,000.00 K

Note: _____

	Superior Check By	F&A	GM/AGM	ACOO
Name : <u>Aye Min Htun</u>	Name : <u>Zoe Ko Htun</u>	Name : _____	Name : _____	Name : _____
NRC No : <u>10/2024/09/00002</u>	NRC No : <u>9/2024/09/00002</u>	NRC No : _____	NRC No : _____	NRC No : _____
Date : <u>9-9-24</u>	Date : <u>22.9.2025</u>	Date : _____	Date : _____	Date : _____
Remark : _____	Remark : _____	Remark : _____	Remark : _____	Remark : _____

Handwritten: 9/11/24
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