

GENERAL EXPENSE CLAIM FORM

Company Name : IS (Mc Expense)

Department Name : Administration

No.	Date	Name	Description	Amount	Remark
1	13.9.24	Phae Klu kha	၈၀၀:၂၅၅၅၂, ၂၀၅၆၅၂ (၈၀၀၅၂)	၆၆,၇၀၀	ငွေအားပေးပေးရန်အတွက်
2	၂၄.၉.၂၄	Phae Klu kha	၆၅၂၀၅.၆၆ (၂၄၀၅၂:၆၅၅၀၀၅၂)	၂၅,၀၀၀	၂၅,၀၀၀ အတွက်
3	30.9.24	Phae Klu kha	၆၆၅၅၅၅၅၅ (၂၅၀၀၅၅)	၅,၅၀၀	၅,၅၀၀ အတွက်
Total Amount				156,700	

Requested by : *Phae Klu kha* (Requester)

Approved by : *Phae Klu kha* (Department Head)

Checked by : *Zin Bo Hwe* (Related FNA/Corp FNA)

Approved by : *Chit San Ko* (OM/AGM/GM)

Approved by : *(Signature)* (ACOO/COO/MD/VCND)