





GENERAL EXPENSE CLAIM FORM

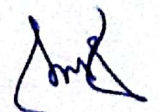
Company Name : CE-5


Department Name : Administration

No.	Date	Name	Description	Amount	Remark
1.	29.1.2025	ei ei nainu	ရေသန့်.	5000	
2.	11.2.2025	"	ရေသန့်.	3600	ငါ့ဝန်ထမ်းများအတွက် ရေသန့်အဖွဲ့က ပြင်ဆင်ပေးထားတာပေါ့
Total Amount				8,600	

Requested by
 Sign : 
 Name : ei ei nainu
 (Requester)

Approved by

 Mee Thazin
 (Department Head)

Checked by

 6/3/25
 (Related FNA/Corp FNA)

Approved by

 (OM/AGM/GM)

Approved by
 (ACOO/COO/MD/VCM)

02-CE5-FNA-FRM-001-00