

win motors



# GENERAL EXPENSE CLAIM FORM



Company Name : \_\_\_\_\_

Department Name : Administration

No.	Date	Name	Description	Amount	Remark
1.	4.2.25	Thein Thein Mye	Water	50000	For car and office
2.	20.2.25	Thein Thein Mye	"	50000	"
3.	16.1.25	Thein Thein Mye	အိမ်အိမ်ခန်းခန်း (ငါ့ ငါ့)	10500	(For 3 person)
4.	6.2.25	Thein Thein Mye	"	7000	(For 2 person)
Total Amount				117500	

Requested by

Approved by

Checked by

Approved by

Approved by

Sign :

Name : Thein Thein Mye  
(Requester)

Zoo Mar  
(Department Head)

Ko Maung Maung  
(Related FNA/Corp FNA)

Ko Maung Maung  
(OM/AGM/GM)

