Fixed Assets Movement Slip Number					FAM : 7	FAM: 7045675				
1) Requester		NAME : Thidaporn Somjai Dept : PURCHASE				Ext Cost Center:				
2) Type		Transfer Scrap Sales Loss Write-off Leading to Third-party Donation Remark:								
3) Details										
Fixed Assets Number	Comp.	Cost Center	Fixed Assets Name	BOI Project	Qty	Invoice No.	Acquisition Cost (Baht)	Book Value (Baht)	New Cost Center	
Thidaporn										
4) Plan		Remove Date://				Set up / Scrap Date//				
5) Service Dept.		Receipt by Dept				& Receipt date :/				
6) Approval		Manager Signature : Date :		BOI Signature : Date :		FM up Signature : Date :		ACC Signature : Date :		
7) Action Status (Completed Date)		Old Owner Completed Date :		New Owner Completed Date :		Sales / Scrap Completed Date		Service Dept Completed Date		
		Completed		Completed Date .		Completed Date		Completed Date		