

CASH ADVANCE - SETTLEMENT FORM

NO : S-____/CAS/901/____/____ (number/CAS/901/mm/yy) *

Date / Tgl : 08/10/2029

Section A (To be Completed by Requesting Dept. & Checked by Accounting Dept.)

Account	Department	Activity	Amount
1. Company **)	212	3.	-
2. Code Location	32101		
Total / Jumlah			-

*) Diisi oleh Finance

**) Company : BBE = 211; IDC = 212; KMIA = 213; BLP = 214; GKCL = 133; GLJ = 911; UDU = 912

Description of The Payment / Deskripsi Pembayaran	Amount / Jumlah	Date / Tanggal

Currency / Mata Uang	Cash Advance Amount / Jumlah Uang Muka	Cash Advance Amount in Words / Terbilang
IDR/USD	17.500.000,00	
Currency / Mata Uang	Used Amount / Jumlah Uang Terpakai	Used Amount in Words / Terbilang
IDR/USD	-	
Currency / Mata Uang	Balance Amount / Jumlah Penyelesaian	Balance Amount in Words / Terbilang
IDR/USD	17.500.000,00	

☐ Bank T/T / Transfer ☐ Cash / Tunai ☐ Cheque / Cek

PURPOSE OF THE (PAYMENT) RECEIPT / TUJUAN (PEMBAYARAN) PENERIMAAN {lampiran dokumen} ***

EAF/CAF No. : S-____/EAF/901/____/____




Realisasi pembelian software & lisensi sistem integration

***) To be completed for explanation of transaction to be paid / Diisi untuk penjelasan transaksi yang ingin dibayarkan

To be Completed by Tax Department / Diisi oleh Departemen Pajak

Withholding Tax (amount)	:		Disetujui / Approved by	Date / Tanggal
Jenis Pajak	:			
VAT DN / LN (amount)	:			
Bank	:	(Jumlah bersih yang harus ditransfer (Total Biaya + VAT - Withholding Tax))		

Payment Approval / Persetujuan Pembayaran

Requester Pemohon 	Manager dan Sr. Mgr. User 	Sr. Mgr. General Adm & Commercial 	Director	Document Recipients Penerima Dokumen (Accounting)	Approved Fin Dept. Head/GM Disetujui Dept Head Fin
Employee Id: _____					
Name: Alfan Date: 08/10/2020	Name: Andryan Date: 08/10/2024	Name: Heryanto Date:	Name: Date:	Name: Date:	Name: Date:

Note / Catatan:

All request advance payment need to be supported by supporting document / Permintaan pembayaran di muka harus dilampirkan dengan dokumen pendukung.

Section B (To be Completed by Finance Department)

☐ Yes / Ya ☐ No / Tidak

Payee / Penerima Uang	:	
Bank Name / Nama Bank	:	
Bank Account Number / No. Account Bank	:	
Payment Method / Metode pembayaran	:	Received by / Diterima oleh
Cashier / Kasir	:	
Name / Nama	:	Name / Nama :
Date / Tgl	:	Date / Tgl :