

Application for Advance Payment/Attachments on Debit Note (AFAP)

no.0023

* Approving Affiliates must indicate that they have received the form (and perhaps include any questions or confirmation)to Issuing Affiliates within 10 days.

Control:
SAMI JF-VI-22-46

Debit# (For Finance Dept. Only)

FOR ISSUING AFFILIATE USE ONLY

1. APPLY TO(SEND TO) : NOTIFICATION OF COSTS INCURRED

(1) FIRST NAME (Block letter)	SIGIT
(3) COMPANY	SAMI JF

DATE SENT	
(2) LAST NAME (Block letter)	PRASETYOKO
(4) DEPARTMENT	GA

(5) DETAILS OF EXPENSE	CURRENCY	AMOUNT
MS AMAN EKSPAT SAMI JF Periode 01/05/2022 ~ 01/05/2023	IDR	4,542,500
TOTAL	IDR	4,542,500

2. ISSUANCE (FROM)

(1) FIRST NAME (Block letter)	JUNIARTA
(3) COMPANY	PASI

(2) LAST NAME (Block letter)	HOTMALLI
(4) DEPARTMENT	GA

(6) AUTHORIZATION FROM SUPERVISOR Name : MASATOSHI MAKINO
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(1) DEPARTMENT	GA
APPROVED BY	
(3) SIGNATURE	
SIGNATURE	 PT. AUTOCOMP SYSTEMS INDONESIA

3. Remarks column :

FOR APPROVING AFFILIATE USE ONLY - MUST BE COMPLETED BY APPROVING DEPARTMENT

4. APPROVAL DATE RECEIVED:

ACCOUNTING INFORMATION

(1) DESCRIPTION OF EXPENSES (経費内容)

(2) GENERAL LEDGER NAME(勘定科目名)

(3) GENERAL LEDGER NUMBER (勘定科目 # & 細目 #)

(4) ESTABLISHMENT NAME (事業所&コード#)

(5) APPROVING DEPARTMENT NAME AND CODE#(部門名&コード#)

(6) CAR LINE(カーレーカー)

The company of the signature must be burdened the cost
APPROVED BY

21 JUNE 2022

(8) SIGNATURE


PT. SEJARANG AUTOCOMP 22
MANUFACTURING INDONESIA

DATE

NAME(Block letter)

SIGNATURE

HIDENISA KURNIA


5. APPROVE

Issuing Affiliate	Approving Affiliate
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Submit to Accounting

Approved By:  Date:
 (Print Name)

Print Name of Approving Affiliates