

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

Kodecs

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

**FOR ISSUING AFFILIATE USE ONLY**

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

(1) FIRST NAME <small>(Block letter)</small>	SIGN
COMPANY	SAMI JF

**(5) DETAILS OF EXPENSE**

**MS AMANEKSPAT SAMI JF**  
Period: 01/05/2022 ~ 01/05/2023

TOTAL	IDR	4,542,500
-------	-----	-----------

**2. ISSUANCE ( FROM )**

(1) FIRST NAME <small>(Block letter)</small>	JUNIARTA
---	----------

(3) COMPANY	PASI
-------------	------

**3. Remarks column**

**HAK APPROVING AFFILIATE USE ONLY - MUST BE COMPLETED BY APPROVING DEPARTMENT**

**4. APPROVAL DATE RECEIVED:**

ACCOUNTING INFORMATION

The company of the signature must be bordered the last  
APPROVED BY

**(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(カーカー)**

(2) LAST NAME <small>(Block letter)</small>	HOTMALL
--	---------

(4) DEPARTMENT	GA
----------------	----

APPROVED BY	
-------------	--

(5) SIGNATURE	
---------------	--

SIGNATURE	
-----------	--

PT. AUTOCOMP SYSTEMS INDONESIA

DATE: 21 JUNE 2022

(8) SIGNATURE

PT. SEMARANG KUROCOMPO 22  
MANUFACTURING INDONESIA

DATE:

NAM(E)(Block letter): HIDEHISA KURIMURA  
SIGNATURE:

**Comments**

SAMI JF-VI-22-46
Debit# (If for Finance Dept. Only)

ISSUING AFFILIATE APPROVE

Approving Affiliate

Submitting Application

N : WRITING SIGN FOR REPAYMENT & APPROVAL

Approved At \_\_\_\_\_ Date \_\_\_\_\_

Org: \_\_\_\_\_ Dept: \_\_\_\_\_

Details about other information