

LAMPIRAN

Lampiran A1. Payment Voucher Pembelian ATK

PAYMENT VOUCHER		PT. TOPY PALINGDA MANUFACTURING INDONESIA	
Payment to amount	: <u>RCA</u> : <u>Rp. 500.000</u>	Voucher No. _____ _____ _____	Date : <u>9 Jun 2020</u> Bank : _____
Account Code	Description	Amount	
	Pembelian Kertas ATK	S	
☐ Cheque ☐ Giro ☒ Cash No. _____ Dated : _____		TOTAL Rp 500.000	
Approved by	Finance	Accounting	Made by
S. Ryama			Chirre
Received by			
Si			

This document should be attached

Lampiran A2. Form Penggantian Uang Obat Berjalan

TOPY
PT. TOPY PALINGDA
MANUFACTURING INDONESIA

FORM PENGANTARAN UANG BEROBAT JALAN

(FORM REPLACEMENT COSTS OUTPATIENT)

PK

No. of employee)

NAMA

(Name)

HUBUNGAN DENGAN YANG SAKIT :

(Relationship with the sick)

NO. KWITANSI

(Number of receipts)

NAMA RS/DOKTER

(hospital Name/Doctor Name)

ALAMAT

(Address)

NOMOR TELEPON

(Number phone)

KETERANGAN

(information)

BIAYA

(Cost)

: Setiawan Aditrya

: 140207

: ☒ Diri sendiri

☐ Anak

☐ Istri

: -

: Klinik Zafira Zarifa

: Perum De'Gnya

: -

: Biaya pemberian 2 pengobatan

: Rp. 3.580.000

	Approve by	Checked by	Made by
Tanggal			
Tanda Tangan	<i>W</i>	<i>S</i>	<i>Handwritten</i>
Nama			