แบบฟอร์ม 2

**เรื่องที่ 4 ความมีประสิทธิผล**

**เรื่องที่ประเมิน 4.1 ผลการใช้ประโยชน์ข้อมูลทางบัญชีในการบริหารจัดการประจำปีงบประมาณ พ.ศ.2565**

**บัญชีลูกหนี้เงินยืมในงบประมาณ**

**การวิเคราะห์ข้อมูลทางบัญชีหรือต้นทุนผลผลิตเพื่อการบริหาร**

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**วิเคราะห์ข้อมูลทางบัญชี/วิเคราะห์สาเหตุ/ข้อเสนอแนะและประโยชน์ที่ได้รับ**

1. วิเคราะห์ข้อมูลทางบัญชี

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1. วิเคราะห์สาเหตุ

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1. ข้อเสนอแนะและประโยชน์ที่ได้รับ

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ตรวจแล้วถูกต้อง

(...................................)

ระดับ สว. ขึ้นไป

แบบฟอร์ม 3

**แบบฟอร์มเปรียบเทียบการส่งใช้คืนเงินยืมของบัญชีลูกหนี้เงินยืมในงบประมาณ   
รหัสบัญชีแยกประเภท 1102010101**

**รหัสหน่วยเบิกจ่าย.................25007XXXXX.....(กองบังคับการ)............................**

**ระหว่างรอบ 9 เดือน กับรอบ 11 เดือน ประจำปีงบประมาณ พ.ศ.2565**

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| **รอบ 9 เดือน ( 1 ต.ค.64 – 30 มิ.ย.65)** | **รอบ 11 เดือน (1 ต.ค.64 – 31 ส.ค.65)** |
| ตรวจสอบแล้ว พบว่า......................................................  ...........................................................................................  ..........................................................................................  ............................................................................................ | ตรวจสอบแล้ว พบว่า......................................................  ...........................................................................................  ..........................................................................................  ............................................................................................ |

จากผลการวิเคราะห์เปรียบเทียบข้างต้น พบว่า...............................................................................................

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ตรวจแล้วถูกต้อง

(...................................)

ระดับ สว. ขึ้นไป

แบบฟอร์ม 4

**เรื่องที่ประเมิน 4.2 การรายงานผลการดำเนินงานต่อผู้บริหารจากการวิเคราะห์ข้อมูลทางบัญชี**

กองบังคับการ รหัสหน่วยเบิกจ่าย 25007XXXXX ได้พิจารณาผลการใช้ประโยชน์จากการวิเคราะห์ข้อมูล.........................................................................................................................................................  
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ตรวจแล้วถูกต้อง

(...................................)

ระดับ สว. ขึ้นไป