

# ASSETS HANDOVER FORM



REGISTERED OFFICE: DEVICE  
 CONTACT NO.: 340-5418  
 EMAIL ADDRESS: justinecate.alimoren.ph@toyoflex.com  
 NAME OF EMPLOYEE: JUSTINE KATE ALIMOREN  
 EMPLOYEE ID NO.: 010971  
 DEPARTMENT/DIVISION: PRODUCTION CONTROL - INVENTORY CONTROL

DEAR SIR / MADAM

PLEASE FIND THE BELOW AS THE ASSETS HANDED OVER TO YOU TO SUPPORT YOU IN CARRYING OUT YOUR ASSIGNMENT IN A MOST PROFICIENT MANNER.

NO.	PARTICULARS	QTY	REMARKS
1	LENOVO LAPTOP E15	1	TFXC0759

(AUTHORIZED SIGNATORIES)

REQUESTOR / APPROVER

MR. NOEL CAPAO / MR. HIROKI KISHIMOTO

RESPONSIBLE FOR HANDOVER

SUSETTE E. SURBANO

I, MR. / MRS. JUSTINE KATE ALIMOREN, HEREBY ACKNOWLEDGED THAT I HAVE RECEIVED THE ABOVE MENTIONED ASSETS(S), I UNDERSTAND THAT THIS ASSET(S) BELONG TO TOYOFLEX CEBU CORPORATION AND IS UNDER MY POSSESSION FOR CARRYING OUT MY WORK, I HEREBY ASSURE I WILL TAKE CARE OF THE DEVICE(S) OF THE COMPANY TO THE BEST POSSIBLE EXTEND.

EMPLOYEE SIGNATURE

JUSTINE KATE ALIMOREN

DATE SIGNED

2021-07-16

Document No.	TCF-G084	Ver.	1	TOYOFLEX CEBU CORPORATION		Retention Period
Effectivity Date	2021-07-16	Prepared by:	Checked by:	Approved by:		2 YEARS
		SUSETTE SURBANO	REY DAGATAN / AMADITO ORTIZANO	TAKAFUMI MATSUNAGA		