

ASSETS HANDOVER FORM



REGISTERED OFFICE: DEVICE
 CONTACT NO.: 340-5418
 EMAIL ADDRESS: sharon.galvez.ph@toyoflex.com
 NAME OF EMPLOYEE: SHARON GALVEZ
 EMPLOYEE ID NO.: 8792
 DEPARTMENT/DIVISION: PRODUCTION CONTROL - PURCHASING

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 THINKPAD	1	TFXC0551

(AUTHORIZED SIGNATORIES)

REQUESTOR / APPROVER

RESPONSIBLE FOR HANDOVER

[Signature] 2021-07-23
 NO. 1-ADAO
[Signature] 2021-07-24
 SUSETTE SURBANO

I, MR. / MRS. SHARON GALVEZ, 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

[Signature]
 SHARON GALVEZ

DATE SIGNED

2021.07.24

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		SUSETTE SURBANO	REY DAGATAN / AMADITO ORTIZANO		TAKAFUMI MATSUNAGA	