

ASSETS HANDOVER FORM



REGISTERED OFFICE: **DEVICE FACTORY**

CONTACT NO.: **340-5418**

EMAIL ADDRESS: **qa.ddc.ph@toyoflex.com**

NAME OF EMPLOYEE: **ADRELYN MAGPARO**

EMPLOYEE ID NO.: **008546**

DEPARTMENT/DIVISION: **QUALITY ASSURANCE**

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	TFXC0573

(AUTHORIZED SIGNATORIES)

REQUESTOR / APPROVER

DENNIS BERNALES / ATSUSHI TAKEUCHI

RESPONSIBLE FOR HANDOVER

SUSETTE B. SURBANO

I, MR. / MRS. **ADRELYN MAGPARO** 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

ADRELYN MAGPARO

DATE SIGNED

2021-07-16

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		SUSETTE SURBANO	REY DAGATAN / AMADITO ORTIZANO	TAKAFUMI MATSUNAGA	