

ASSETS HANDOVER FORM



REGISTERED OFFICE: Device Factory
 CONTACT NO.: 340-5418
 EMAIL ADDRESS:
 NAME OF EMPLOYEE: Jaehan T. Togle
 EMPLOYEE ID NO.: 010934
 DEPARTMENT/DIVISION: T-Assy / Office

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	DESKTOP (DELL)	1	TFXC0256

(AUTHORIZED SIGNATORIES)

REQUESTOR / APPROVER

RESPONSIBLE FOR HANDOVER

2021-07-23
 IVEN ABERION / YOSHIYUKI MORITA
 2021-07-23
 SUSETTE SURBANO

I, MR. / MRS Jaehan T. Togle 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

JAEHAN T. TOGLE

DATE SIGNED

2021-07-23

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		SUSETTE SURBANO	REY DAGATAN / AMADITO ORTIZANO	TAKAFUMI MATSUNAGA		