

# ASSETS HANDOVER FORM



REGISTERED OFFICE: Device Factory

CONTACT NO.: 340-5418

EMAIL ADDRESS: kimberly.campugan.ph@toyoflex.com

NAME OF EMPLOYEE: CAMPUGAN, KIMBERLY C.

EMPLOYEE ID NO.: 10969

DEPARTMENT/DIVISION: PRODUCTION CONTROL- INVENTORY

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	TFXC0758

(AUTHORIZED SIGNATORIES)

REQUESTOR / APPROVER

NOEL CAPAO / HIROKI KISHIMOTO

RESPONSIBLE FOR HANDOVER

SUSETTE B. SURBANO

I, MR. / MRS KIMBERLY C. CAMPUGAN 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

KIMBERLY C. CAMPUGAN

2021-07-16

DATE SIGNED

2021-07-16

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		SUSETTE SURBANO	REY DAGATAN / AMADIYO ORTIZANO	TAKAFUMI MATSUNAGA		