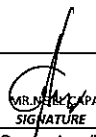



IT Installation/ Repair Request Form

Date of Request
2020-06-29


MR. NIEL APAD
SIGNATURE
Local Supervisor/Manager


MR. HIROKI KISHIMOTO
SIGNATURE
Japanese Department Manager

Name: MARY ROSE ABE
I.D No. 009428
PC Name/No: TFXC0545
Div/Dep't: PC-Purchasing Group

Type of Installation	<input type="checkbox"/> (Entry) (For Install)	<input type="checkbox"/> (Exit) (For Deletion)
<input type="checkbox"/> R-Pics System		<input type="checkbox"/> Chat App/Messenger
<input type="checkbox"/> Cybozu/Garoon		<input type="checkbox"/> Wireless Network
<input type="checkbox"/> E-Mail		<input type="checkbox"/> LAN Cable Assembly/Installation
<input type="checkbox"/> Active Directory		<input type="checkbox"/> PC Reformat
<input type="checkbox"/> Siam System		<input type="checkbox"/> Documentum/Astrux System
<input type="checkbox"/> Data Surfing		<input type="checkbox"/> Toss System
<input type="checkbox"/> Change of PC User previous user/I.D No.: _____ current user/I.D No.: _____		<input type="checkbox"/> SAP
<input type="checkbox"/> File Server Drive (specify) _____ (purpose) _____		
<input type="checkbox"/> Transfer of PC from dep't _____ to dep't _____		
<input type="checkbox"/> Software (specify) _____ (purpose) _____		
<input type="checkbox"/> Others (pls. specify) <u>USB PORT ACCESS (FLASHDRIVE)</u>		

Requests Performed by: SUSPITA TURDANO
IT Personnel

2020-06-29
Date

Document No.	TCF-G022	Ver.	2	Toyoflex Cebu Corporation		Retention Period
Effectivity Date	2018-03-19	Prepared by:	REY DAGATAN	Checked by:	AMADITO ORTIZANO	Approved by:
						TAKAFUMI MATSUNAGA
						2 years