ASSETS HANDOVER FORM

TOYOFLEX CEBU CORPORATION

			10101	TEN OFDO OO	MITTHEON		
REGISTERED C	FFICE:	DEVICE FACTORY					
CONTACT NO.:		340-5418					
EMAIL ADDRESS:		N/A					
			*				
NAME OF EMPLOYEE:		QUEENIE MAE ABAYON					
EMPLOYEE ID NO.:		009037					
DEPARTMENT/DIVISION:		QUALITY ASSURANCE					
DEAR SIR / MADAM							
PLEASE FIND THE BELOW AS THE ASSETS HANDED OVER TO YOU TO SUPPORT YOU IN CARRYING							
			PROFICIENT MAN				
						9	6
	NO.	PARTICULARS			QTY	REMARKS	
1		LENOVO LAPTO		OP E15	1	TFXC0574	
(AUTHORIZED SIGNATORIES)							
REQUESTOR / APPROVER DENNIS BERNALES / ATSUSHITAKEUCHI 7, 28							
RESPONSIBLE FOR HANDOVER SUSETTEB. SURBANC							
I, MR. / MRSQUEENIE MAE ABAYONHEREBY 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							
		QUEENIE	ME ABAYON				
) ()				
DATE SIGNED							
2020 07-16							
			1			DEDIT CORPORATION	Retention Period
Document No.	TCF	F-G084	Ver. Prepared by:	1 Checked by:	TOYOFLEX	CEBU CORPORATION Approved by:	
Effectivity Date	202	1-07-16	SUSETTE SURBANO		MADITO ORTIZANO	TAKAFUMI MATSUNAGA	2 YEARS