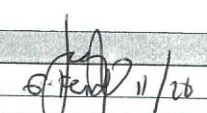




Service Support Building (SSB), Administration Area, Lot 14, Phase 1-A, FPIP, Sto. Tomas, Batangas, Philippines
Tel No. : (043) 405 6388-89 / (043) 405 6407-08

MEMORANDUM NO. HRADM

TO : 19_PK30772
NAME : Dimaano, Kim Chester Cuasay
FROM : PKIMT Management
SUBJECT : Notice for Suspension
No. of Offense : 1st offense
DATE : November 17, 2019

PKIMT	
ACKNOWLEDGEMENT FORM	
COMMENTS/ ASSESMENT	
No. Offense:	1st - 10 DAY SUSPENSION 11/27/2019
Line	DATA ENTRY DOZL INITIAL - B
ACKNOWLEDGE BY:	
MANAGER	 Signature Over Printed name/ Date

This refers to the alleged offense(s) you have committed at 10/30/2019 to name: Dimaano, Kim Chester Cuasay

Violation Offense No. V

OFFENSES AGAINST COMPANY INTEREST

Section No. 10

Omission or commission of an act in connection with or against the policies & procedures, SOPs, set work guidelines & to the particular duties and responsibilities inherent to the employee's work

Description:

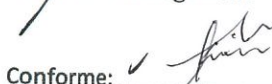
Not Following SOP - Did not conduct checking of Shikakari when encountered Machine Error during Process

You are hereby given 5 days upon receipt of this letter to explain in writing why you should not be given a disciplinary action for such offense. Failure to comply would mean you voluntarily waive your right to due process and the company has no recourse but to implement the penalty provided for based in our company rules and regulations.

This is for your guidance and strict compliance.

NOTED BY:


PKIMT Management

Conforme: 
19_PK30772

FURUKAWA - Production Operator


(Please attach your written explanation upon returning of this letter)



Service Support Building (SSB), Administration Area, Lot 14, Phase 1-A, FPIP, Sto. Tomas, Batangas, Philippines

Tel No. : (043) 405 6388-89 / (043) 405 6407-08

MEMORANDUM NO. HRADM

TO : 19_PK30772
NAME : Dimaano, Kim Chester Cuasay 
FROM : PKIMT Management
SUBJECT : Notice to explain
No. of Offense : 1st offense
DATE : 16-Nov-19

This refers to the alleged offense(s) you have committed at 30-Oct-19 to name: Dimaano, Kim Chester Cuasay

Violation Offense I V

OFFENSES AGAINST COMPANY INTEREST

Section No. 10

Omission or commission of an act in connection with or against the policies & procedures, SOPs, set work guidelines & to the particular duties and responsibilities inherent to the employee's work

Description :

Not Following SOP - Did not conduct checking of Shikakari when encountered Machine Error during Process

You are hereby given 5 days upon receipt of this letter to explain in writing why you should not be given a disciplinary action for such offense. Failure to comply would mean you voluntarily waive your right to due process and the company has no recourse but to implement the penalty provided for based in our company rules and regulations.

This is for your guidance and strict compliance.

NOTED BY:


PKIMT Management

Conforme: 

19_PK30772

FURUKAWA - Production Operator

(Please attach your written explanation upon returning of this letter)

I ALERT WRITTEN EXPLANATION

☐ FAS


Control No: FALP- 1A-1910-2057



AGENCY

Please Specify:

3 KMT

Signature of Auditor	
Audited By:	Noted By:

Name: DIMAANO, KIM CHESTER
Position: ASSOCIATE
ID Number: 19PK 90772
Batch No.: 255
Car Model/Line: DAIHATSU DOIL / INITIAL

Process: AUTO Crimping TRO 244
Group/Shift: DO/B
Date/ Time: OCTOBER 30, 2019/7.55
No. of Offense: 1ST
Superior Name: J. VELASQUEZ

Audit Findings: NOT FOLLOWING SOP

Details:

DID NOT CONDUCT CHECKING OF SHIKAIKARI WHEN ENCOUNTERED MACHINE ERROR DURING PROCESS.


WRITTEN EXPLANATION


Ako po si Kim Chester Dimaano ay naka encounter ng tangle sa measuring belt. ~~pagmamapa~~ ~~aka~~ I nagramadom check po ako after po na naka encounter ng tangle wire sa measuring belt. Hindi na po ulit ako nagsag check rung mag start ulit ako nang mass prod.


For Counseling: 11/17/2019 @ admin let pass / Cwty
K. Velasco
J. Velasco
C. Velasco

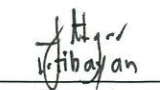
Remarks/ Evaluation:

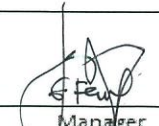
for issuance of memo (based from handbook)


Signature of Employee:
Date: 19-11-06


Jr Staff
Date: 11-11-06

For: 
Staff
Date: 11/12/16


Supervisor
Date: 11/13


Manager
Date: 11/17

I ALERT WRITTEN EXPLANATION

☐ FAS ☐ MDHII
☒ PKIMT ☐ ADD EVEN

Control No: FALP-IA-1910-2052

<u>J. Abanador</u> Audited By:	<u>G. MACADIA</u> Noted By:
-----------------------------------	--------------------------------

Name: Dimaano Kim Chester
 Position: associate
 ID Number: 19 PM 10772
 Batch No.: 255
 Car Model/Line: Daimatsu 2011 / Initial

Process: auto crimping 7RD 244
 Group/Shift: ps1B
 Date/ Time: oct 30, 2019 / 7:53
 No of Offense: 1st
 Superior Name: J. relasque2

Audit Findings: Not following SOP

Details: Did not conduct checking of shikakari when encountered machine error during process.

WRITTEN EXPLANATION

Ako po Kim Chester-Dimaano ay nahuling hindi
sumasunod sa SOP. Hindi ko po alam na kailangang
gumawa nang sampling error kase ang mag tangle
ang wire sa measuring belt.

Remarks/ Evaluation:

- To Staff /LV please investigate why member didn't know the rule
- for verify the audited item, as per associate the error is tangled wire but it is not needed to

[Signature]
 Signature of Employee
 Date: 11-06-19

[Signature]
 Jr Staff
 Date: 11-06-19

For: [Signature]
 E: [Signature]
 Staff
 Date: 11/11/19

[Signature]
 Supervisor
 Date: 11/11/19

[Signature]
 Manager
 Date: _____

Car Model: _____

Associate's Name: _____

Shift/ TRD No. : _____

Date/Time Error Encountered	Code of Error	SPECS	Actual Sample	Produce By:	Checked by: (PD Jr.Staff)	Verified by:	
						EM Jr. Staff	Q.A Personnel
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____
		Terminal Name: _____ Actual C/H: _____ Actual I/H: _____	SAMPLE WIRE	PD <input type="checkbox"/> EM <input type="checkbox"/>	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____	Good <input type="checkbox"/> No Good <input type="checkbox"/> Signature: _____

Machine Error

A.	TCM Error	B.	Rear And Front Side Mis-crimping	C.	Over-Tension Terminal	D.	Rear And Front Side Mis-Stripping
E.	Mis- seal Insertion	F.	Dropped air Pressure	G.	Others: (Pls. specify)		

NOTE: (Stop the operation if encounter 3 consecutive machine error, Call the attention of Jr.Staff / Staff and Wait for further advise.)

Sample made by production is ok to verified by Q.A. associate and no need to verify of EQD if error can be fix by production.

For Tangled wire and measuring belt error no need to attach sample but need to check the length and appearance of actual shikakari.
Write the actual measurement on the comment portion of first output kanban.

Put O if GOOD, X if NO GOOD, / if NOT APPLICABLE.