

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

ТО

19 PK30341

NAME

Espina, Jayson Caringal - Jayson

FROM

PKIMT Management

SUBJECT

Written Warning

No. of Offense

1st offense

DATE

July 14, 2020

This refers to the alleged offense(s) you have committed at

06/08/2020

to name:

PKIMT

Espina, Jayson Caringal

ACKNOWLEDGEMENT FORM

Lot . Written Warner

HERINE O. CABRERA

Signature Over Printed name/ Date

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 - Connector not properly set on jig during attachment of protector on shiage 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 process are the process.

the penalty provided for based in our company rules and regulations.

This is for your guidance and strict compliance.

NOTED BY:

PKIMT Management

10 py2024

FURUKAWA - Production Operator

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

I-ALERT WRITTEN EXPLANATION

AGENCY Please Specify: Primi Name: Leginal Taylon. Process: Group/Shift: Miller Process: Group/Shift: No. Audited By: Checked by: Noted By: Name: Leginal Taylon. Process: Group/Shift: No. Audited By: Checked by: Noted By: Non-compliance Reference/Document Control Number: Laght 30.341. Date! Time: Jue 9. 30.36 3.09 Control Number: Batch No.: 35.3. No. of Offense: No. Offense:	FAS		Ks3		Control No:	FAIR-1A-2006-1147	
Name: Keylind Jagu Schi Process: Shidge Dimens Jen Process		oción PKIMI	*	R. Alkgro		mg/Magadia	
Position:	Please Spi	ecisy.	1	Audited By:	Checked by:	Noted By:	
Car Model/Line: Subject Superior Name: Subject Superior Name: Subject	Position: ID Number:	Associate	Group/Shift: Date/ Time:	June 9, 2020 2:05	Control Number:		
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