



Date: February 15, 2020

To: Magana, Evelyn L. EN No.: EN69-0459

No. of Offence: 1st offence

From: Human Resources and Administrative Dept.

Re: As stated

Based on incident reported on January 22, 2020. You hereby allegedly violated:

One Source Code of Discipline Section: 3.2. Use of Company Property

(3.2.14 Not following company standards, operating procedures, work instruction and practices which may or may not result to damage of company property.)

In line with the violation, this memorandum will serve as your

( ) Written Warning	( ) 10-days Suspension	
1-day Suspension	( ) 15-days Suspension	
( ) 2-days Suspension	( ) 30-days Suspension	
( ) 3-days Suspension	( ) Warning to Dismissal Depending to gravity of offense	
( ) 5-days Suspension	( ) Dismissal Effective	
( ) 7-days Suspension	( ) For record purposes only	

For your reference. Thank you

Best Regards,

PROJECT SUPERVISOR

RECEIVED BY:

## SIGNITURE OVER PRINTED NAME

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į	RECOMMENDATION FO		
NAME:	Magana Evelyn	KIVI	·
EN No. :	ENU9-0459	<i>'' O</i>	Í
VIOLATION:	Un-authorized Repair	- Staggina	
SUSPENSION DATE:	March	Employee Signiture	
RETURN DATE:	March 5, 7020 March 6, 2020	- Gh	(ON)
RETURN SHIFT:	Day shift	Immediate Supervisor	na
HINT/SCHEDULE:	Shiff -B	1. /	nart- (0998) 977-4625
D/LINE:	7107	- Holy	<b>1</b> '
Paalala: Iwanan	ang ID sa Coordinator bago ang suspension date at sa muling  Coordinator bago mag 8am	Chent Manager	
	Coordinator bago mag 8am	pagpasok galing sa suspension kuhanin ang i	D'sa i
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				Control No:	+A121A · 2001 · 0100
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Name:			Audited By:	Checked by:	G Magadia Noted By:
Position:	modonor Exertin	Process:	One source		Noted By:
ID Number:	nscodole	Group/Shift:	NC-0	Non-comp	/ liance Reference/Document
Dotah Na	EUGG: 0459	Date/ Time: No. of Offense:	January 27, 2010	[45	Control Number:
Car Model/Line:	268 Subaru 17109	_	151	FAIP- WI	- OCA · 15017
Deta	ils of Audit Findings	oupertor Name,	J. Mad panlay	TREATMENT O	FTOTEIGN MATERIAL WHITE
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		REMARI	KS/EVALUATION #		
i-Alert writte	en only	Agency/FA	LP Written Only(based	on handhook) o.7	-1
Need day/s	suspension(based from he	ndbook & Memo-k	or Major Non-compliance	). down	Stry can I want
Alexand)	A	Mr. T		- Comp	
t. mag⇔n∧ Employee	J-mhui	7	TOTAL OH	Can homa	4
Employee Date: <u>/・</u> ク3・		Staff	Staff ,	Supervisor	Harring .
		-3 00	Date: 1   Works	Date: 1/24	Date: 3
				<u> </u>	7

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ne	NOTICE TO EXPLAIN						
DATE: EMP NAME:	Magana, Ev	velyn		PROJECT: EMP NO:	Furukawa EN69-0459	DEPT:	
POSITION:	Associate			SUPERIOR:			
As your immediate superlor the One Source Specialized So [Cite Code of Discipline provi	am putting you on ervices Inc. Code of	notice that based on p f Discipline; see attache	reliminary invest d Incident Repor	tigations, vou a	llegedly violated the	following provision in	
on [date/time] at [location, if	applicable).						
For this reason, One Source is	considering the fo	ollowing disciplinary acti	on against you:				
Provision/Policy Urdinal No. of Off (within the prescriptive			d) Disciplinary Action Per Code of Discipline				
			<i>*</i>				
Please submit this within five disciplinary action stated above Employee's Explanation :	(5) days upon rece e should not he ta	eipt of this Notice of you ken against you.	r written explan	ation, reasons,	and justifications as	to why the	
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		•			Marana	80 - 12 - 20	
				<i>\-</i> -	Employee Sign	ature and Date	
en e		(To be filled up by C	one Source HR o	nly.)			
Superior's Recommendation							
As your immediate supervisor! in writing, we find that you viol	am putting you on ated the	ont a rotte that after a thon; -	rough investigati	on, presented (	evidence, and statem	ents made by you	
For this reason, One Source has			rovision in the O disciplinary actio		e of Discipline:		
Written Warni	ng	15-day Susper	ision and War	ning of	For Re	ecords Only	
1 5-day Suspens	ion	Dismissal Dismissal					
10-day Suspen	sion	For Further Inc	ventigation				
						•	
N 02-15-	י אראו או			Noted by:			
XII VIL-13	100 ~			_	Manager, HR & Ad	min. Department	
Immediate Superior (Signatu	re over Printed Na	me)					
1. Proper way for erasures			2	. Standard wav	of writing date.		
	on signature 2 lines				4 (year-month-day)		

Form Number : HRF005-00