**ACCOUNTABILITY FORM**

*Accountability No: TMTC-ACC-0124-002*

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **QTY** | **ITEMS** | **SERIES No.** | **PARTICULAR** | **REMARKS** |
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|  | *TOTAL:* | | | |

*“I hereby acknowledge receipt of the following items issued by TMT Foods, Inc. for which I am completely liable and accountable.”*

RELEASED BY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ RECEIVED BY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 *Signature over printed name / Date Signature over printed name / Date*

APPROVED BY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 *Signature over printed name / Date*