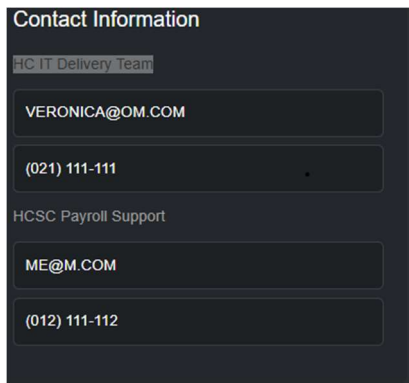


MAKE THE FOLLOWING AMENDMENTS FOR THIS SECTION



The screenshot shows a dark-themed form titled 'Contact Information'. It contains two sections. The first section, 'HC IT Delivery Team', has three input fields: a text field containing 'VERONICA@OM.COM', a text field containing '(021) 111-111', and a text field containing 'ME@M.COM'. The second section, 'HCSC Payroll Support', has three input fields: a text field containing 'ME@M.COM', a text field containing '(012) 111-112', and an empty text field.

UNDER THE CONTACT INFORMATION MAKE THE BELOW AN INPUT CELL (WHERE IT SAYS, “HC IT DELIVERY TEAM” AS THIS COULD BE ANY TEAM. KEEP THE FORMAT AS IS BUT LEAVE SPACE TO COMPLETE THE 3 MOST IMPORTANT PERSONS INVOLVED IN THE SOP, IE, SPACE TO COMPLETE THE PERSON’S NAME & SURNAME, CONTACT DETAILS AND THE PERSONS ROLE, THIS MUST BE REPEATED MAXIMUM 3 X,

DO THE SAME FOR THE HCSC PAYROLL SUPPORT SECTION (THIS COULD ALSO CHANGE BUT WILL BE LIMITED TO THE FOLLOWING TEAMS (HCSC PAYROLL SUPPORT: PROCESS OWNER WILL BE SHARON KOFF, HCSC SUPPORT CENTRE: PROCESS OWNER WILL BE NAEEMA CASSIEM, PAYROLL ACCOUNTING AND TAX: PROCESS OWNER WILL BE DENZIL BARTLETT, SHARE SCHEME: PROCESS OWNER WILL BE ROBERT MURPHY, HRMIS: PROCESS OWNER WILL BE FAIEK CAROLISEN (CREATE DROPDOWN MENU FOR THIS AND THEN CONTACT DETAILS CAN BE MANUALLY INPUTTED.

LEAVE SPACE TO INPUT THE ACTUAL DOER/S OF THE PROCESS (FIELDS FOR, PERSON’S NAME & SURNAME, CONTACT DETAILS AND THE PERSONS ROLE TO BE COMPLETED, THIS MUST BE REPEATED MAXIMUM 3 X,

THEN DO THE SAME AS ABOVE FOR ROYSTON CLARKE (WILL FINAL APPROVAL) HCSC SHARED SERVICES AREA HEAD