

Part Name HEADREST BRACE		Cust. Part Number 1353270_PIA11	
Shown on Drawing No. 1353270_PIA11		Orig Part Number 1353270_PIA11	
Engineering Change Level 1	Date 23-Mar-08		
Additional Engineering Changes N/A	Date N/A		
Safety and/or Government Regulation <input checked="" type="checkbox"/> No <input type="checkbox"/>	Purchase Order No.	Weight (kg)	0.032
Checking Aid No. 0004	Checking Aid Engineering Change Level NONE	Date	NA
ORGANIZATION MANUFACTURING INFORMATION		CUSTOMER SUBMITTAL INFORMATION	
Vendor Machine & Stamping 867598216		VENDOR MACHINE DE MEXICO	
Organization Name & Supplier's Vendor Code 28908 Northline Road Street Address Taylor, Michigan 48180		Customer Name / Division STEVE BARKOC Buyer / Buyer Code UCB1	
City Taylor	Region	Postal Code	Country
MATERIALS REPORTING		Application	
Has customer-required Substance of Concern Information been reported? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> n/a			
Submitted by (MDS or other Customer format)		IMDS ID# 56382502	
Are polymeric parts identified with appropriate ISO marking codes? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> n/a			
REASON FOR SUBMISSION (Check at least one)			
<input checked="" type="checkbox"/> Initial Submission	<input type="checkbox"/> Change to Original Construction or Material		
<input type="checkbox"/> Engineering Change(s)	<input type="checkbox"/> Supplier or Material Source Change		
<input type="checkbox"/> Tooling Transfer, Replacement, Refurbishment, or Additional	<input type="checkbox"/> Change in Part Processing		
<input type="checkbox"/> Correction of Discrepancy	<input type="checkbox"/> Parts Produced at Additional Location		
<input type="checkbox"/> Tooling Inactive > than 1 year	<input type="checkbox"/> Other-please specify below		
REQUESTED SUBMISSION LEVEL (Check one)			
<input type="checkbox"/> Level 1 -	Warrant only (and for designated appearance items, an Appearance Approval Report) submitted to customer		
<input checked="" type="checkbox"/> Level 2 -	Warrant with product samples and limited supporting data submitted to customer.		
<input type="checkbox"/> Level 3 -	Warrant with product samples and complete supporting data submitted to customer		
<input type="checkbox"/> Level 4 -	Warrant and other requirements as defined by customer.		
<input type="checkbox"/> Level 5 -	Warrant with product samples and complete supporting data reviewed at organization's manufacturing location.		
SUBMISSION RESULTS			
The results for <input type="checkbox"/> dimensional measurements <input checked="" type="checkbox"/> material & functional tests <input type="checkbox"/> appearance criteria <input type="checkbox"/> statistical process package			
These results meet all drawing record requirements: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (if "NO" Expansion Required)			
Mold / Cavity / Production Process		Cross Gender	
DECLARATION			
I affirm that the samples represented by this warrant are representative of our parts which were made by a process that meets all Production Part Approval Process Manual 4th Edition Requirements. I further affirm that these samples were produced at the production rate of 4800 / 8 hours. I also certify that documented evidence of such compliance is on file and available for review. I have noted any deviations from this declaration below.			
EXPLANATION/COMMENTS			
Is each Customer Tool Property tagged and numbered? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> n/a			
Organization Authorized Signature <i>S. Sekerachy</i>		Date Aug 19, 08	
Print Name Suzanne Sekerachy	Phone No 518-728-0813	FAX No 518-728-0852	
Title Quality Supervisor	Email sekerachy@vmsindormachine.com		
FOR CUSTOMER USE ONLY (IF APPLICABLE)			
PPAP Warrant Disposition: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> On			
Customer Signature <i>[Signature]</i>		Date August 26th 08	
Print Name ANTONIO DANIEL	Customer Tracking Number (Optional)		