



Part Name	<u>Exhaust Hanger</u>	Cust. Part Number	<u>PCA 4300AB</u>
Shown on Drawing No.	<u>PCA 4300 AB "1"</u>	Orig Part Number	<u>Q4300AB</u>
Engineering Change Level	<u>"1" FMT 3164</u>	Dated	<u>3-Mar-08</u>
Additional Engineering Changes	<u>N/A</u>	Dated	<u>N/A</u>
Safety and/or Government Regulation	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Purchase Order No.	<u>48564</u>
Weight (kg)	<u>0.3039</u>		
Checking Aid No.	<u>2147</u>	Checking Aid Engineering Change Level	<u>Rel</u>
Dated	<u>21-Dec-08</u>		
ORGANIZATION MANUFACTURING INFORMATION		CUSTOMER SUBMITTAL INFORMATION	
<u>Windsor Machine & Stamping (2009) Ltd. 607396215</u>		<u>Presstran Industries</u>	
Organization Name & Supplier/Vendor Code		Customer Name / Division	
<u>26655 Northline Road</u>		<u>Barry Curtis</u>	
Street Address		Buyer / Buyer Code	
<u>Taylor, Michigan 48180</u>		<u>GMT 800</u>	
City	Region	Postal Code	Country
MATERIALS REPORTING			
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 IMDS or other Customer format:		<u>IMDS 10695216/3</u>	
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 type="checkbox"/>	Initial Submission	<input type="checkbox"/>	Change to Optional 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 checked="" type="checkbox"/>	Other-please specify below
			<u>Production location change</u>
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 type="checkbox"/>	Level 2 - Warrant with product samples and limited supporting data submitted to customer.		
<input checked="" 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 checked="" 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" Explanation Required)			
Mold / Cavity / Production Process		<u>CNC Head, Bend</u>	
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 / 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: <u>change location from Tilbury Assembly, division of Windsor Machine and Stamping to Pioneer Polymers, division of Windsor Machine and Stamping</u>			
Is each Customer Tool Properly tagged and numbered? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> n/a			
Organization Authorized Signature: <u>S. Little</u>		Date	
Print Name	<u>John Little</u>	Phone No	<u>519-682-3594</u>
		FAX No	<u>519-682-9555</u>
Title	<u>Quality Manager</u>	E-mail	<u>jlittle@windsormachine.com</u>
FOR CUSTOMER USE ONLY (IF APPLICABLE)			
PPAP Warrant Disposition: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Other			
Customer Signature: <u>[Signature]</u>		Date: <u>4/23/09</u>	
Print Name		Customer Tracking Number (Optional)	