



Part Submission Warrant

Part Name	<u>Head Rest Mechanism</u>	Cust. Part Number	<u>2020053</u>
Shown on Drawing No.	<u>2020053</u>	Orig Part Number	<u>1495162</u>
Engineering Change Level	<u>Rev. 1</u>	Dated	<u>May 19- 09</u>
Additional Engineering Changes	<u>None</u>	Dated	
Safety and/or Government Regulation	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Purchase Order No.	
Weight (kg)			<u>1.54</u>
Checking Aid No.		Checking Aid Engineering Change Level	
Dated			

ORGANIZATION MANUFACTURING INFORMATION

CUSTOMER SUBMITTAL INFORMATION

Windsor Machine & Stamping Ltd.(2009)
 Organization Name & Supplier/Vendor Code
7072 Smith Industrial Drive
 Street Address
McGregor Ontario N0R 1J0 Canada
 City Region Postal Code Country

AVANZAR INTERIOR TECHNOLOGIES
 Customer Name / Division
Dora Smith
 Buyer / Buyer Code
TOYOTA 416W
 Application

MATERIALS REPORTING

Has customer-required Substance of Concern information been reported? Yes No n/a
 Submitted by IMDS or other Customer format: IMDS # 131196487

Are polymeric parts identified with appropriate ISO marking codes? Yes No n/a

REASON FOR SUBMISSION (Check at least one)

- | | |
|---|--|
| <input type="checkbox"/> Initial Submission | <input type="checkbox"/> Change to Optional Construction or Material |
| <input checked="" 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 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 checked="" 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 dimensional measurements material & functional tests appearance criteria statistical process package
 These results meet all drawing record requirements: Yes No (if "NO" Explanation Required)

Mold / Cavity / Production Process Mechanism Assembly

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 **300/8** 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 Properly tagged and numbered? Yes No n/a

Organization Authorized Signature: [Signature] Date April 6/10

Print Name John Little Phone No 519-726-0613 FAX No 519-726-0652

Title Quality Manager E-mail jlittle@windsormachine.com

FOR CUSTOMER USE ONLY (IF APPLICABLE)

PPAP Warrant Disposition: Approved Rejected Other

Customer Signature [Signature] Date: 4/14/10

Print Name MICHAEL SWOKER Customer Tracking Number (Optional)