



Part Submission Warrant

Part Name	Armrest Frame Assem	nbly Cust. Part Nu	umber "		99910-01			
Shown on Drawing No.	99910-01		na		MEDIUM.			
Engineering Change Level		10	,		Dated	July 6/10		
Additional Engineering Changes	na				Dated	na	· · · · · · · · · · · · · · · · · · ·	
Safety and/or Government Regula	ation s N	Order No.	*****		Weight (kg)	0.943		
Checking Aid No.	_Checking Aid Engineer	ring Change Level			Rel	Dated	na	
ORGANIZATION MANUFA	CTURING INFORM	ATION	CUSTON	IER SUBM	ITTAL INFOR	MATION		
G&R 1, Division of Windsor Machine & Stamping				Windsor Machine &Stamping: G&R 3				
Organization Name & Supplier/Vendor Code 7072 Smith industrial Drive				Customer Name / Division				
Street Address McGregor, ON NOR 1J0				Buyer / Buyer Code				
City Region	Postal Code	Country	Application			*		
MATERIALS REPORTING Has customer-required Substance of Submitted by IMDS or of		een reported?	Yes	<u> </u>	No 🗌	n/a	-	
Are polymeric parts identified with a	ppropriate ISO marking o	codes?	Yes		No X	n/a	-	
Correction of Discrepar Tooling Inactive > than REQUESTED SUBMISSION Level 1 - Warrant or Level 2 - Warrant wi X Level 3 - Warrant wi Level 4 - Warrant ar	acement, Refurbishment, ncy 1 year	or Additional popearance items, an Arimited supporting data complete supporting daddefined by customer.	submitted to co	Supplier or M Change in Pa Parts Produc Other-please r r roval Report) ustomer.		nange ocation omer	- - -	
SUBMISSION RESULTS The results for X dimensional	al measurements. X	terial & functional tests	sappeara	ance criteria	statistical	process package		
These results meet all drawing red	ord requirements:		X	Yes	No	(if "NO" Explanati	on Required)	
Mold / Cavity / Production Process DECLARATION I affirm that the samples repress Production Part Approval Procerate of 30 / 1 hours. I also ceri any deviations from this declara EXPLAINATION/COMMENTS:	ented by this warrant a ss Manual 4th Edition tify that documented e	Requirements. I furtl	her affirm tha	t these sam	oles were produc	ced at the production	n	
Is each Customer Tool Properly	tagged and numbered	!?	es No	[X]	n/a			
Organization Authorized Signat	ture: J. Litt	le x hitt		Date	August 30	0/10		
Print Name John Little	Phone	e No 519-726-061	13	FAX No	519-726-0	0652	-	
Title Quality Manager	E-mail <u>ilittle@</u>	windsormachine.com	1				-	
PPAP Warrant Disposition: Customer Signature Print Name Ana f	FOR CUSTOMER US PAPPROVED R RCMMC 2 Chau	ejected 🗍 Othe	•			lug30/	7 10	