Part Submission Warrant

Part Name Headrest Stay Cust. Part Number	L0143277AA-01	9
Shown on Drawing No. L0143277AA-01 Orlg Part Number	amber 866552AE	
Engineering Change Level 21	Dated	30-Aug-07
Additional Engineering Changes NVA	Dated	*
Safety and/or Government Regulation Yes X No Purchase	Purchase Order No. Weight (kg)	0.382
Checking Aid No. Checking Aid Engineering Change Level	Dated	
ORGANIZATION MANUFACTURING INFORMATION	CUSTOMER SUBMITTAL INFORMATION	
Windsor Mechine & Stamping 607396215 Organization Name & Supplier/Vendor Code 25655 Northiline Road	Lear Corporation Outcomer Name / Didukon Brian Yamdenberghis 58004	
Street Address Taylor, Michigan 48180 Oty Region Postal Code County	Buyer / Buyer Coda D219 Application	
MATERIALS REPORTING Has customer required Substance of Concern Information been reported?	XX 788	
Submitted by IMDS or other Customer format: IMDS ID	MDS ID# 72797045	
Are polycoeric parts identified with appropriate ISO exarieng codes?	☐ Yes ☐ No 区 ru/a	
REASON FOR SUBBITISSION (Check at least one) Initial Sabritasion Engineering Change(s) Tooling: Transfer, Replacement, Refurbishment, or Additional Correction of Discrepancy Tooling Inactive > than 1 year	Change to Optional Construction or Metartal Supplier or Netwind Source Change Change in Part Processing Parts Produced at Additional Location Other-places specify below	£
REQUESTED SUBMISSION LEVEL(Check one) Level 1 - Warrant only (and for designated appearance farms, an Appearance Approval Report) submitted to customer. Level 2 - Warrant with product samples and families supporting data submitted to customer. Level 3 - Warrant with product samples and complete supporting data submitted to customer. Level 4 - Warrant and other requirements as defined by customer. Level 5 - Warrant with product samples and complete supporting data reviewed at organization's manufacturing location.	serance Approval Report) submitted to customer bretted to customer. submitted to customer reviewd at organization's manufacturing location.	
SUBMISSION RESULTS The results for [X] dimensional measurements. [X] material & functional toess These results are not all dissults are	appearance criteria statistical process package	· · · · · · · · · · · · · · · · · · ·
Mold / Cavity / Production Process Forming Machine		·
DECLARATION I effirm that the samples represented by this warrant are representative of our parts which were made by a process that meets all faffirm that the samples represented by this warrant are representative of our parts which were made by a process that meets all Production Production rets of 1800 / 8 hours. I also certify that documented evidence of such compliance is on the and available for review. I have noted any deviations from the declaration below. Change of tabe supplier	ts which were made by a process that neets all mine that these samples were produced at the producince is on the and available for review. I have noted	citon
is each Customer Tool Properly tagged and numbered? X Yes	Date Stota, 2008	<i>10.</i> ≈
Print Name Ana Cheu Phone No 519-737-7155 ext 242 Title PPAP Co-ordinator E-mail adhau@windsormaching.com	ext 242 FAX No _ 519-737-7102	
FOR CLISTOMER USE ONLY (IF APPLICABLE) PPAP Warrant Disposition: Approved Rejected Other		/ama
Print Name Rein G. & Sbero Customer Tracking Number (Optione)		