

DAIMLER Chrysler



**Part Submission Warrant**

|   |  |   |         |
|---|--|---|---------|
| Part Name <b>Retainer</b>   |  | Cust. Part Number <b>77127-00914-MBRK</b> |         |
| Shown on Drawing No. <b>77127-00914-MBRK</b>  |  | Orig Part Number <b>77127-00914-MBRK</b>  |         |
| Engineering Change Level <b>2</b>   | Dated <b>3-Mar-04</b>  |   |         |
| Additional Engineering Changes <b>N/A</b>   | Dated <b>N/A</b>   |   |         |
| Safety and/or Government Regulation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   | Purchase Order No. <b>78092</b>                                      | Weight (kg) <b>0.032</b>                  |         |
| Checking Aid No. _____  | Checking Aid Engineering Change Level _____                          | Dated _____                               |         |
| <b>ORGANIZATION MANUFACTURING INFORMATION</b>   |  | <b>CUSTOMER SUBMITTAL INFORMATION</b>     |         |
| <b>Windsor Machine &amp; Stamping</b> <b>607398215</b>  |  | <b>Hope Global</b>                        |         |
| Organization Name & Supplier/Vendor Code  |  | Customer Name / Division                  |         |
| <b>26655 Northline Road</b>   |  | <b>A. DeCosta</b>                         |         |
| Street Address  |  | Buyer / Buyer Code                        |         |
| <b>Taylor, Michigan 48180</b>   |  | <b>GMX 345 Hummer</b>                     |         |
| City  | Region   | Postal Code                               | Country |
|   |  |   |         |
| <b>MATERIALS REPORTING</b>  |  |   |         |
| 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:   |  | <b>IMDS ID# 46928790</b>                  |         |
| Are polymeric parts identified with appropriate ISO marking codes? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> n/a   |  |   |         |
| <b>REASON FOR SUBMISSION (Check at least one)</b>   |  |   |         |
| <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       |   |         |
|   | <b>Annual</b>  |   |         |
| <b>REQUESTED SUBMISSION LEVEL(Check one)</b>  |  |   |         |
| <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.   |  |   |         |
| <b>SUBMISSION RESULTS</b>   |  |   |         |
| 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 (*"NO" Explanation Required)  |  |   |         |
| Mold / Cavity / Production Process _____  |  |   |         |
| <b>DECLARATION</b>  |  |   |         |
| 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: _____   |  |   |         |
| 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: <u>Ana Chau</u>  |  | Date: <u>Feb 27/08</u>                    |         |
| Print Name <u>Ana Chau</u>  | Phone No <u>519-737-7155 ext 242</u>                                 | FAX No <u>519-737-7102</u>                |         |
| Title <u>PPAP Co-ordinator</u>  | E-mail <u>achau@windormachine.com</u>                                |   |         |
| <b>FOR CUSTOMER USE ONLY (IF APPLICABLE)</b>  |  |   |         |
| PPAP Warrant Disposition: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Other _____   |  |   |         |
| Customer Signature <u>Cecilia M. M... ..</u>  |  | Date: <u>FEB/28/08</u>                    |         |
| Print Name <u>HOPE GLOBAL</u>   | Customer Tracking Number (Optional) _____                            |   |         |