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Part Submission Warrant

Part Name Slave Side	H/R Tube	_Cust. Part Number	90316-01			
Shown on Drawing No.	90316-01	Orig Part Number	90316-01			
Engineering Change Level	1			Dated _	10/26/2011	
Additional Engineering Changes	N/A			Dated <u>I</u>	N/A	-
Safety and/or Government Regula	ation 🗌 Yes 🕱 No	Purchase Order No.		\	Veight (kg) _	
Checking Aid No. 14342	Checking Aid Engineering C	Change Level	1.0		Dated _	9/19/201
ORGANIZATION MANUFACTUR	RING INFORMATION	CUSTOME	ER SUBMITT	AL INFORM	MATION	
Windsor Machine & Stamping (I		Windsor N	Machine & S	tamping (U	.S) Ltd	
Organization Name & Supplier/Ve 26655 Northline Road	ndor Code	Customer Na				
Street Address		Matt Kelley				
Taylor, Michigan 48180		Buyer / Buyer Ford Headr				
City Region i	Postal Code Country	Application				
MATERIAL O DEPOSITIVO						
MATERIALS REPORTING				_		
Has customer-required Substance of Conc	ern information been reported?	∐ Yes	∐ No	X n/a		
Submitted by IMDS or other	Customer format:					
Are polymeric parts identified with appropri	ate ISO marking codes?	Yes	☐ No	X n/a		
REASON FOR SUBMISSION (Ch	eck at least one)					
X Initial Submission	sch at least offe)	П	Change to Optic	and Canala ati		
Engineering Change(s)			Supplier or Mate			
Tooling: Transfer, Replacement	ent, Refurbishment, or Additional		Change in Part I		gc	
Correction of Discrepancy			Parts Produced	at Additional L	ocation	
Tooling Inactive > than 1 yea	r		Other-please sp	ecify below		
REQUESTED SUBMISSION LEVE	L(Check one)	-	-			
	nd for designated appearance item	s an Annearance Anaroual Da	nort) aubmittad i	la suntaman		
	oduct samples and limited supporting			io cusiomer		
	oduct samples and complete suppo					
	ner requirements as defined by cust		er			
	oduct samples and complete suppo					
	ouct samples and complete suppo	rung data reviewd at organizati	on's manulactur	ing location.		
SUBMISSION RESULTS	4	745-40				
The results for X dimensional mea	asurements X material & function	onal testsappearance	criteria 🔲 si	tatistical proces	ss package	
These results meet all drawing reco	ord requirements:	X	res No	O (if "I	NO" Explanation Re	quired)
Mold / Cavity / Production Process	Form, Broach, C	hamfer. Weld				1000)
	***************************************					ľ
DECLARATION						1
I affirm that the samples represented by	this warrant are representative	e of our parts which were ma	ade by a proce	ess that meet	s all	- 1
Production Part Approval Process Manu	ual 4th Edition Requirements, I	further affirm that these san	nples were pro	duced at the	production	
rate of 1000 / 8 hours. I also ceriti any deviations from this declaration belo	ly that documented evidence of	f such compliance is on file	and available	for review. I h	nave noted	
EXPLAINATION/COMMENTS:	M.					1
s each Customer Tool Properly tagged	and numbered?	X Yes No	n/a			
Organization Authorized Signature:	Beth Muse	D	ate 1/	1201040		1
	Deer 17 page		ale	/30/2012		
Print Name Beth Muse	Phone No 73	34-941-7320 F/	AX No _734	1-941-6208		
	mail <u>bmuse@windsorma</u>					
	R CUSTOMER USE ONLY (IF	APPLICABLE)				
PPAP Warrant Disposition:	Approved Rejected	Other _				
Sustomer Signature	1116	Phonosoperator		- 7	1,/ , ,	
1 -11 11			Dat	e: <u></u>	416	
rint Name MaTT Lell E	Cu	stomer Tracking Number (C	Optional)			
	/					- 1

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Part Submission Warrant

Part Name Lock Tube	ASM	Cust. Part Number	90316-01-ASM	
Shown on Drawing No.	90316-01-ASM	Orig Part Number	90316-01-ASM	·
Engineering Change Level	REL		Dated	10/26/2011
Additional Engineering Changes	N/A		Dated	N/A
Safety and/or Government Regul	ation Yes X No	Purchase Order No.		_Weight (kg)
Checking Aid No. 14301	Checking Aid Engineering C	Change Level	1.0	Dated 8/26/201
ORGANIZATION MANUFACTUI	RING INFORMATION	CUSTOME	R SUBMITTAL INFO	RMATION
Windsor Machine & Stamping (U.S) Ltd	Windsor N	Machine & Stamping	(U.S) I +d
Organization Name & Supplier/Ve 26655 Northline Road		Customer Na	me / Division	(O.O) Eta
Street Address		Matt Kelle Buyer / Buyer		
Taylor, Michigan 48180		Ford Head	rest	
City Region	Postal Code Country	Application		
MATERIALS REPORTING				
Has customer-required Substance of Con-		Yes	∐ No X n/a	l .
Submitted by IMDS or other	Customer format:			
	• •			
Are polymeric parts identified with appropr		Yes	∐ No X n/a	
REASON FOR SUBMISSION (Ch	eck at least one)		20	
Engineering Change(s)			Change to Optional Constru Supplier or Material Source	
	nent, Refurbishment, or Additional		Change in Part Processing	
Correction of Discrepancy Tooling Inactive > than 1 year	ar.		Parts Produced at Additions Other-please specify below	
REQUESTED SUBMISSION LEVI	EL(Check one)	-	,	
	and for designated appearance item	is, an Appearance Approval Re	port) submitted to customer	•
Level 2 - Warrant with pr	roduct samples and limited supporti		,	
	roduct samples and complete suppo		er	
	her requirements as defined by cus			
Level 5 - Warrant with pr	oduct samples and complete suppo	orting data reviewd at organizati	on's manufacturing location	l•
SUBMISSION RESULTS The results for X dimensional me	easurements X material & function	onal tests appearance	e criteria	ocess package
These results meet all drawing rec			·	• • • • • • • • • • • • • • • • • • •
Mold / Cavity / Production Process	nati nerodni u uma siya. 💗 siyasi anuda saresi ni mi sahali sarahkemi.		169 🔲 140	(if "NO" Explanation Required)
Hold / Outrly / Froduction Froduction	Tom, Broadi C	Harrier, Weld		
DECLARATION				20 000
l affirm that the samples represented b Production Part Approval Process Man	y this warrant are representative ual 4th Edition Requirements. I	e or our рапs which were ma further affirm that these san	ade by a process that me	sets all
rate of 1000 / 8 hours. I also ceri	tify that documented evidence of	of such compliance is on file	and available for review	. I have noted
any deviations from this declaration bel	ow.			
EXPLAINATION/COMMENTS:				
s each Customer Tool Properly tagged	and numbered?	X Yes No	□ n/a	
a autori outorinar i atri i roporty tagget	and numbered!	A les No	IVa	
Organization Authorized Signature:	Beth Muse	D	ate 1/30/2012	
Print Name Beth Muse	Phone No 73	34-941-7320 F	AX No <u>734-941-620</u>	В
Title Quality Manager E-	mail <u>bmuse@windsorma</u>	achine.com		
FC	OR CUSTOMER USE ONLY (II	F APPLICABLE)		
PAP Warrant Dispostion:	Approved Rejected	Other		
Customer Signature MANUA	12		Date: 2	2/1/17
rint Name Matt Kelke	C C	ustomer Tracking Number (0	Optional)	
	/			