



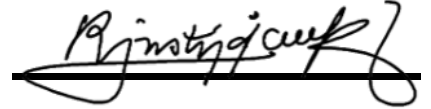
By signing this Company Asset Accountability Form, I hereby acknowledge that I have read and fully understand all its provisions and should not hold the company liable for any loss or damage to my assets and accountabilities while they are in my possession.

**Employee ID No.**

5653

**Date and Signature**

September 13, 2025



**Employee Name**

Rhode Justin Delantar Devivar

**Employee Comment:** \_\_\_\_\_

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**iPloy IT Confirmation**

This is to confirm that the assigned assets listed above have been reviewed and approved for release by the iPloy IT personnel mentioned below.

**Released by**

Charlie Fuentes

**Date Released**

September 12, 2025