

A. Requestor information

- 1. Name : NORKATRINA BINTI KAMARUDIN
- 2. Designation
- : LEAD PRODUCTION PLANNER

B. Details of Request

- 1. Reason for change
- : TO CHANGE FORMAT OF THE MASTER LISTING
- 2. Document issue number : 0

3. Document revision number

: 1

- 4. Documents affected : PUBL
- : PUBLICATION MASTER LISTING (GAM/E-020)
- 5. Details of change
- : (Fill the table below)

Document	Issue	Rev	Details of change
Reference	No	No	
GAM/E-020R1	0	1	 TO INCLUDE SIGNATURE OF PERSON PREPARING AND APPROVING THE MASTER LIST TO CHANGE "REFERENCE NO" COLUMN TO "RECEIVED FROM" TO INCLUDE "TITLE", "REV NO"AND "REV DATE" UNDER DESCRIPTION COLUMN TO INCLUDE "NO OF VOL"AND "NO OF SET" COLUMN TO INCLUDE "LOCATION" COLUMN



C. Review and Approval

Reviewed and approved by						
Signature	:	<u>Att</u>				
Name Designation	:	SYAFRUL YAMANI BIN SAFRUDDIN Engineering Manager Galaxy Aerospace (M) Sdn Bhd (1040262-D)				
Date	:	23 June 2023				

D. Acceptance (FOR QA USE ONLY)

Accepted by	
Signature	:
Name	:
Designation	:
Date	:
Remark (if any)	

E. Registration and Update (FOR QA USE ONLY)

1. Internal Publication Masterlist	: 🗆	Date :	
2. GAMS Portal	: 🗆	Date :	
3. Requestor notice	: 🗆	Date :	



maintenance . repair . overhaul

INSTRUCTION FOR COMPLETING GAM/Q-070, DOCUMENT CHANGE REQUEST

Section A(1)	Fill in name of reques	Fill in name of requestor							
Section A(2)	Fill in designation of r	Fill in designation of requestor							
Section B(1)	Fill in reason for chan	Fill in reason for change							
Section B(2)		Fill in issue number of the document intended to be reviewed,							
		approved, and accepted.							
Section B(3)		Fill in revision number of the document intended to be reviewed,							
		approved, and accepted. Fill in document(s) affected by the change request.							
Section B(4)			-	proved affects any procedure and					
		policy, please state them as such in this column							
	Attach GAM/Q-070a	Attach GAM/Q-070a to complete this section.							
	State the section of document affected, and the details of proposed								
	change.								
	example :								
			_						
		ssue No	Rev. No	Details of change					
Section B(5)	GAM/EPM/ISS.1	-	1	Part 3.1 – Amended sentence in					
	GAIVI/EFIVI/155.1	-	Т	para 2 for better understanding.					
				para 2 for better understanding.					
	GAM/E-011	1	1	Amended Section 5(a) to include					
				staff ID column.					
	Fill in signature, name, designation and date of personnel reviewing and								
Section C	approving the document change request, either HOD or personnel								
	nominated by HOD if he/she is not available.								
Section D	Fill in personnel accepting the document change request, either the QAM or personnel nominated by HOD if he/she is not available.								
Section D	Fill in remark regarding the document change request, if any								
	Tick off box if the document has been registered in Internal Publication								
Section E(1)	Masterlist (GAM/Q-067), and insert date of registration.								
Section E(2)	Tick off box if the document has been updated onto GAMS portal, and								
Section E(2)	insert date of update.								
Section E(3)		Tick off box if the requestor has been notified of the document change							
555667 2(5)	request acceptance	request acceptance, and insert date of notification.							