

GINTELL (M) SDN BHD

ARTWORK DESIGN CHANGE FORM

DATE: _____ NAME: _____ DEPARTMENT: _____
DESCRIPTION OF CHANGE
EXPLANATION FOR CHANGE
CHANGE APPROVED? – [] YES [] NO
DESIGN CHANGE DATE: CHANGED BY: _____ SIGNATURE: _____ ARTWORK REQUESTER SIGNATURE: _____
SENIOR GRAPHIC DESIGNER SIGNATURE: _____ ASISTANT MARKETING MANAGER SIGNATURE: _____

Prepared by and date:

Reviewed by and date:

Approved by and date: