**STEWARD INITIATED ADJUSTMENT REQUEST FORM**

Please use the space below to provide details regarding your request for an adjustment to an AMS report submitted in a previous quarter. Stewards are limited to one adjustment request per report. Please note the time limits on adjustments - ensure this form is completed and submitted to the National Steward Services Team prior to the relevant deadlines.[[1]](#endnote-1) If you have questions, please contact Steward Services: adjustments@cssalliance.ca.

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| **Company and Contact Information** |
| **Company Name:** |  |
| **Steward Number:** |  |
| **Contact Name:** |  |
| **Title:** |  |
| **Phone Number:** |  |
| **Email Address:** |  |
| **Initiation Date:** |  |

1. **Please describe the nature of each adjustment request, data period, type (credit or debit or both); provide details about each type of error (e.g., product classification, volume, duplicate reporting, under-reporting, logic error, etc.) and its root cause (e.g., used incorrect reporting units, incorrect information provided by supplier, etc.), for all affected periods (unless the same across all affected periods in which case you need only provide the information once):**

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| *(e.g., AMS 2017 Q2 Report (Q1 Data) up until and including 2017 Q4 Report (Q3 Data) duplicate reporting - Reported in error on resident brands.)* |

1. **How was each error(s) detected? What work was performed to ensure all errors were identified?**

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| *(e.g., Internal Audit of Report – yes, the audit was comprehensive and this adjustment request corrects for all identified errors.)* |

1. **Please describe the documentation available to substantiate your adjustment request (sales reports that include all SKU numbers affected; vendor documentation of volumes; internal audit report; etc.):**

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|  *(e.g., Sales Report, Spreadsheet of materials and volumes by SKU, Adjustment)* |

1. **Please list the attachments to this document that you are submitting to support this adjustment request:**

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| *(e.g., Adjustments Worksheet, Sales Report, Original material component and volume data, Data restated in correct units by SKU)* |

1. **Please complete each spreadsheet (see embedded Excel docs) as it relates to your adjustment request. You only need to complete the white cells, and only the materials that are undergoing changes:**

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| **AMS Adjustment Request Templates:**  |

I attest to the accuracy and completeness of the information provided, and I understand that adjustments based on it may be subject to review or audit either before or after such adjustments are processed. Further, I understand the information contained within this form, any attachments to it, and information provided by: (Steward Company Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_) to Automotive Materials Stewardship (AMS) that is related to this adjustment request may be shared with a third party professional services firm (auditing and risk management services) for the sole purpose of providing assurance services with respect to the requested adjustment(s), and with which AMS has executed an appropriate contractual arrangement and/or non-disclosure agreement to ensure this information is held in confidence. Also, I understand the steward will be invoiced by AMS for the third party assurance work AMS may require to validate the steward’s adjustment request; such invoicing would be made in accordance with an agreement executed between AMS and the steward prior to execution of the third party assurance work. Also, I understand AMS’s Adjustment Policy ([see link](https://www.automotivematerialsstewardship.ca/policies/)). Last, I understand reports may be adjusted once only by stewards; previously adjusted reports may not be adjusted a second timei.

We certify that by signing this document, we are declaring that the undersigned is authorized to provide the aforementioned information and make this undertaking.

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Signature of Authorized Party Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Title of Authorized Party in Print

1. **ADJUSTMENT REQUESTS**

**Time Limits & Documentation Requirements:** AMS policy allows stewards to request adjustments to their reports for a period of up to two years from the associated report submission due date (regardless of the date the steward submitted its report). For example, a steward may request an adjustment through April 30, 2019 to the volumes included in their 2017 Q2 Report (Q1 Data), which was due April 30, 2017. Stewards must submit a completed adjustment request package to AMS by the deadline in order to enable the subsequent review, processing, and/or approval of the adjustment request.

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| **Report Data** | **2018** **Q2 Report(Q1 Data)** | **2018** **Q3 Report(Q2 Data)** | **2018** **Q4 Report****(Q3 Data)** | **2019** **Q1 Report(Q4 Data)** | **2019****Q2 Report(Q1 Data)** | **2019** **Q3 Report(Q2 Data)** | **2019****Q4 Report****(Q3 Data)** |
| Deadline forAdjustment Request | 30-Apr-2020 | 31-Jul-2020 | 31-Oct-2020 | 31-Jan-2021 | 30-Apr-2021 | 31-Jul-2021 | 31-Oct-2021 |

 [↑](#endnote-ref-1)