

autossplice *INSPECTION REPORT*
Innovative Interconnections

10431 Wateridge Circle, Suite 110
 San Diego, CA 92121

INSPECTOR (Please Print Name)	
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QA MGR. (Please Print Name)	
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1st. Article
 Supplier IR
 Autosplice IR
 Special Request
 Prototype
 Production

PART NUMBER:		REV:	SUPPLIER:				MAT'I:		REPORT NUMBER (AS):			
DRAWING NUMBER:		REV:	P.O./W.O. #:				QTY:		DATE INSPECTED:			
PART NAME:			MOLD / DIE CAVITY #:				LOT SAMPLE SIZE:		REQUESTED BY:			
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COMMENTS:

DEVIATION #: _____ **REMARKS:** _____ **CERTIFICATION #:** _____
(materials, plating, etc.)
 Approved
 Not Approved

QA ENGINEER: _____ **DATE:** _____ **DESIGN ENGINEER:** _____ **DATE:** _____ **MANUFACTURING ENGINEER:** _____ **DATE:** _____

INSPECTION REPORT - CONTINUATION SHEET

PART NUMBER:		REV:	SUPPLIER:				REPORT NUMBER (AS):			
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