


CERTIFICATE OF COMPLIANCE

From:
To:
Attention: Receiving Inspection
PO#:
Customer P/N:
Your Co P/N:
Quantity:
Shipping Date:
We hereby certify that all items in the above shipment have 
Name:
Title:

NOTICE

THIS CERTIFICATE OF COMPLIANCE MUST BE COMPLETED AND RETURNED WITH YOUR SHIPMENT BEFORE YOUR INVOICE CAN BE PROCESSED FOR PAYMENT

Form Rev: Orig

Your Logo

Your Logo
Address
Phone, Fax, etc

CERTIFICATE OF COMPLIANCE FOR MILITARY PRODUCT

Distributor	Supplier	Customer
Name:	Name:	Name:
Address:	Address:	Address:
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]

Manufacturer's Name:
[Redacted]
[Redacted]
[Redacted]

Date Code / Lot#	Inspection Document	Qty Shipped
1:		
2:		
[Redacted]		
[Redacted]		

We hereby certify	[Redacted]
[Redacted]	[Redacted]
[Redacted]	[Redacted]
[Redacted]	[Redacted]

Copy

Form Rev: Orig

Your Logo
Address
Phone, Fax, etc

CERTIFICATE OF COMPLIANCE FOR COMMERCIAL PRODUCT

Distributor	Customer
Name:	Name:
Address:	Address:
City:	City:
State / ZIP:	State / ZIP:
Phone:	Phone:

[Redacted]
[Redacted]
[Redacted]
[Redacted]
[Redacted]
[Redacted]
[Redacted]

[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]

[Redacted]
[Redacted]

Authorized Signature:
Date:

Form Rev: Orig

Your Logo	Your address, phone, fax etc
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CERTIFICATE OF CONFORMANCE

Supplier:	
Part#:	
PO#:	
[Redacted]	
[Redacted]	
[Redacted]	
[Redacted]	
[Redacted]	
[Redacted]	
[Redacted]	
[Redacted]	

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It is hereby certified [Redacted Signature]

Name:  [Redacted] Date [Redacted]

Form Rev: Orig

Your Logo		Your address, phone, fax etc
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CERTIFICATE OF CONFORMANCE

Buyer PO#:		
Buyer Item#:		
Buyer PO P/N:		
Quantity:		
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]

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[Redacted]	[Redacted]
[Redacted]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
[Redacted]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
[Redacted]	[Redacted]

Seller's Authorized Quality Representative	Date
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Form Rev: Orig

**CERTIFICATE OF CONFORMANCE
BUYER REQUIRED DRAWINGS, EO's,
SPECIFICATIONS AND DEVIATIONS-WAIVERS**

Drawing	Rev	Specification	Rev	EO#	Deviation-Waiver

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worldwide.

1. PART OR MATERIAL CERTIFICATION FORM		ATA Specification:	
2. Seller's Name:		3. Reference Number:	
4. Organization:		Phone:	
		Fax:	
5a. Seller's Contract Number:		5b. Buyer's Contract Number:	

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* (Optional) Installer must cross check eligibility with applicable technical data.