



Part Submission Warrant

Part Name MX150 GEN 2 RECEPTACLE		Cust. Part Number MU5T14A464APA000	
Shown on Drawing Number DUAL ROW SEALED ASSEMBLY MAT SEAL		Org. Part Number MU5T-14A464-APA	
Engineering Change Level AELE-E-13113841-383		Dated 160127-2001	
Additional Engineering Changes N/A		Dated 20210909	
Safety and/or Government Regulation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Purchase Order No. N/A Weight (kg) 0,0026	
Checking Aid Number N/A Checking Aid Eng. Change Level N/A		Dated N/A	
ORGANIZATION MANUFACTURING INFORMATION		CUSTOMER SUBMITTAL INFORMATION	
Molex Interconnect (Chengdu) Co., Ltd. DUNS: 545270444		Nursan	
Supplier Name & Supplier/Vendor Code		Customer Name/Division	
No. 8-18 Kexin Road, Hi Tech Zone		N/A	
Street Address		Buyer/Buyer Code	
Chengdu City	Sichuan Province	611731	P.R. China
City	Region	Postal Code	Country
MATERIALS REPORTING		N/A	
Has customer-required Substances of Concern information been reported?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Submitted by IMDS or other customer format:		IMDS ID# 970947515	
Are polymeric parts identified with appropriate ISO marking codes?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> n/a	
REASON FOR SUBMISSION (Check at least one)			
<input checked="" type="checkbox"/> Initial submission		<input type="checkbox"/> Change to Optional Construction or Material	
<input type="checkbox"/> Engineering Change(s)		<input type="checkbox"/> Sub-Supplier or Material Source Change	
<input type="checkbox"/> Tooling: Transfer, Replacement, Refurbishment, or additional		<input type="checkbox"/> Change in Part Processing	
<input type="checkbox"/> Correction of Discrepancy		<input type="checkbox"/> Parts produced at Additional Location	
<input type="checkbox"/> Tooling Inactive > than 1 year		<input type="checkbox"/> Other - please specify	
REQUESTED SUBMISSION LEVEL (Check one)			
<input type="checkbox"/> Level 1 - Warrant only (and for designated appearance items, an Appearance Approval Report) submitted to customer.			
<input type="checkbox"/> Level 2 - Warrant with product samples and limited supporting data submitted to customer.			
<input checked="" type="checkbox"/> Level 3 - Warrant with product samples and complete supporting data submitted to customer.			
<input type="checkbox"/> Level 4 - Warrant and other requirements as defined by customer.			
<input type="checkbox"/> Level 5 - Warrant with product samples and complete supporting data reviewed at organization's manufacturing location.			
SUBMISSION RESULTS			
The results for <input checked="" type="checkbox"/> dimensional measurements <input checked="" type="checkbox"/> material and functional tests <input type="checkbox"/> appearance criteria <input checked="" type="checkbox"/> statistical process package			
These results meet all design record requirements: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> NO (If "NO" - Explanation Required)			
Mold / Cavity / Production Process Assy Process			
DECLARATION			
I affirm that the samples represented by this warrant are representative of our parts, which were made by a process that meets all Production Part Approval Process Manual 4th Edition Requirements. I further affirm that these samples were produced at the production rate of 22152 / 8 hours. I also certify that documented evidence of such compliance is on file and available for your review.			
I have noted any deviation from this declaration below.			
EXPLANATION/COMMENTS:			
Is each Customer Tool properly tagged and numbered? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> n/a			
Organization Authorized Signature <i>Kevin Maechtlinger</i>		Date 26-Oct-2021	
Print Name Kevin Maechtlinger		Phone No. +49-7243-335-376 Fax No. N/A	
Title Quality Engineer		E-mail kevin.maechtlinger@molex.com	
FOR CUSTOMER USE ONLY (IF APPLICABLE)			
PPAP Warrant Disposition: <input type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Other			
Customer Signature		Date	
Print Name		Customer Tracking Number (optional)	