



## Product/Process Change Notification Form

<b>PCN Number:</b>	PCN 2016-511
<b>Date of Notification:</b>	10/19/2016
<b>Apex P/N(s):</b>	CD14-13, PA03, PA03/12, PA03A, PA04, PA04A, PA05, PA05A, PA50, PA50A, PA52, PA52A, PA89, PA89-11, PA89A, SA03, SA03-11, SA03-12, SA03/10, SA03/33, SA08, SA12, SA12-13, SA12L
<b>Date PCN Effective:</b>	10/25/2016
<b>Reason for Change:</b>	<input type="checkbox"/> Design /New Rev. <input type="checkbox"/> Assembly Site <input type="checkbox"/> Assembly Process <input checked="" type="checkbox"/> Other (specify) New supplier
<b>Description of Change:</b>	A second source supplier has been qualified for the cap used in Apex Power Dip devices. The dimensions, performance specifications and characteristics for this cap are unchanged.
<b>Apex P/N Change:</b>	<input type="checkbox"/> Yes, New Part Number: <input checked="" type="checkbox"/> No
<b>Lot Effective Date:</b>	1645 Product incorporating this change may be shipped interchangeably with existing unchanged products.
<b>Quality &amp; Reliability impact:</b>	Qualification Data: <input type="checkbox"/> Required <input checked="" type="checkbox"/> Not Required
<b>Datasheet Change Required?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, briefly explain:

---

### Acknowledgement of Receipt of Notice:

Does customer waive PCN Effective Date?     YES     NO

Company Name: \_\_\_\_\_

Name (please print): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Customer Representative is to obtain the customer acknowledgement/signature and return this notification to Apex Microtechnology, attn: PCN administrator at fax number (520) 888-3329, or email to [custserv@apexanalog.com](mailto:custserv@apexanalog.com).*

**NOTE: Lack of acknowledgement within 30 days of the date of notice, constitutes acceptance of change.  
(Reference JEDEC Industry Standard: JESD-46)**