		161 Alden Road, Units 7 & 8, Markham, Ontario Canada L3R 3W7 Tel: +1 416 754-3322 Fax: +1 416-754-3299 Email: support@edac.net http://www.edac.net <b>ENGINEERING CHANGE NOTICE</b>	
		Date:	Document Number
Originator:	Mit Patel	April 19,2024	20240419-00
Phone No.	416-754-3322		
Email Address:	<a href="mailto:mpatel@edac.net">mpatel@edac.net</a>	Revision Number	SHEET
Department	Quality	1	1 of 1

CHANGE TYPE

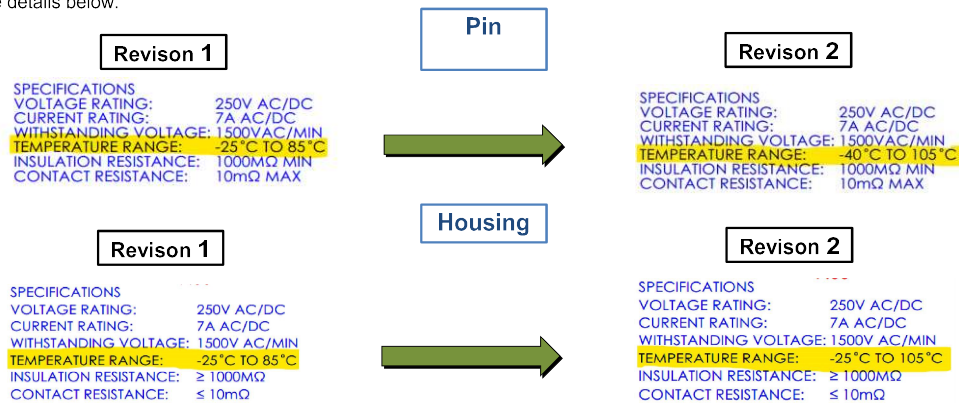
- ☐ CLASS I Customer notification and approval required prior to implementation
- ☒ CLASS II Customer notification only, no approval required
- ☐ CLASS III No customer notification required

REASON OF CHANGE

Drawing Revision

DESCRIPTION OF CHANGE:

14L Pin header temprature range changed from -25° C TO 85° C to -40° C TO 105° C  
14L Housing temprature range changed from -25° C TO 85° C to -25° C TO 105° C  
See the details below.



PARTIES AFFECTED

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Customer     | <input type="checkbox"/> NORCOMP        | <input checked="" type="checkbox"/> ECA     |
| <input checked="" type="checkbox"/> Distributors | <input type="checkbox"/> MH             | <input checked="" type="checkbox"/> EDG     |
| <input type="checkbox"/> Suppliers               | <input checked="" type="checkbox"/> ETW | <input checked="" type="checkbox"/> EDAC UK |

KEY TARGET DUE DATES IF CHANGE IS APPROVED TO PROCEED (check if applicable and show target dates as known)

- |  |       |  |       |
|--|-------|--|-------|
| <input type="checkbox"/> Submit Quote    | _____ | <input type="checkbox"/> PPAP from Supplier      | _____ |
| <input type="checkbox"/> Prod. Trial Run | _____ | <input type="checkbox"/> MRD of Production Parts | _____ |
| <input type="checkbox"/> Run at Rate     | _____ | <input type="checkbox"/> UL / CSA / RoHS / REACH | _____ |

<b>ACKNOWLEDGEMENT FOR ECN INITIATION: (OPTIONALS)</b>		<b>STATUS</b>  <b>APPROVED</b>  <b>CCS CHANGE REQUEST #</b>  <b>REJECTED</b>  Change REJECTED by:  Rejected Date:
<input type="checkbox"/> Tooling Rep _____	<input type="checkbox"/> Process Eng Rep _____	
<input type="checkbox"/> Mfg Eng Rep _____	<input type="checkbox"/> Facilities Rep _____	
<input type="checkbox"/> Production Rep _____	<input checked="" type="checkbox"/> Sales Rep. _____	
<input type="checkbox"/> Materials Rep _____	<input type="checkbox"/> Product Eng. Rep. _____	
<input checked="" type="checkbox"/> Quality Rep <u>Mit Patel</u>	<input type="checkbox"/> Purchasing Rep _____	
<b>APPROVALS FOR ECN INITIATION (REQUIRED)</b>		
<input checked="" type="checkbox"/> General Manager <u>Bob Sakitkovski</u>	<input checked="" type="checkbox"/> Quality Engineer <u>Mit Patel</u>	
<input checked="" type="checkbox"/> Engineering Manager <u>Ronnie Sta Monica</u>	<input checked="" type="checkbox"/> Engineer <u>Vinesh Kamania</u>	
<input checked="" type="checkbox"/> Business Development Manager <u>Kobie Samuels</u>		