

HEALTHCRAFT PRODUCTS INC.

QC INSPECTION REPORT

Part # :		Operation:		Program #:		Machine:		MO #:		Qty:		Qty:	
DIM.												PASS / FAIL	Checked By
Tolerance													
Tool Id:-													
First-Off													
Second-Off													
Third-Off													
IN-PROCESS INSPECTION REPORT													
Notes:												TOTAL:	SCRAP QTY:

HEALTHCRAFT PRODUCTS INC.

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[illegible]

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[illegible]

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[illegible]