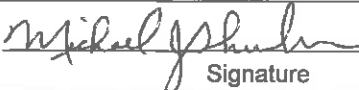



# QUALITY DOCUMENTATION LIST (QDL)

(The QDL is for reference only and is not a quality record.)

Supplier Name L-3 CINCINNATI ELECTRONICS		Supplier Code ZL748801	Shipper No. N/A	
Purchase Order No. 4500030494	Line Item (s) 00036	Part Name ATLAS ORDNANCE CONTROL UNIT (OCU) ASSY	Part No. 1F67700-1	Revision D
FAI Report Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Applicable Serial Number (s): 0034		

**NOTE:** All items above must be filled in. If NOT APPLICABLE (N/A), then fill that in the space provided.

Check Off	P.O. Clause	Type of Document	Number of Sheets
<input checked="" type="checkbox"/>	QC004/QC005/QC010	Certificate of Conformance	SDT
<input type="checkbox"/>	QC008	Certificate of Conformance – High Strength Fasteners	N/A
<input type="checkbox"/>	QC012	Certificate of Conformance – Raw Material	N/A
<input type="checkbox"/>	QC013	Certificate of Conformance – NDT Test Report	N/A
<input type="checkbox"/>	QC014	Certificate of Conformance – Special Process Approval	N/A
<input type="checkbox"/>	QC015	100% Inspection	N/A
<input type="checkbox"/>	QC016	100% Inspection – Critical Characteristics	N/A
<input type="checkbox"/>	QC033	Foreign Object Damage (FOD) Awareness	N/A
<input type="checkbox"/>	QC034	Foreign Object Damage (FOD) Control	N/A
<input type="checkbox"/>	QC041	Limited Life and Age Control Items	N/A
<input type="checkbox"/>	QC042	Limited Operating Life Items	N/A
<input checked="" type="checkbox"/>	QC081	Submittal – Acceptance Test Report	SDT
<input type="checkbox"/>	QC083	Submittal – First Article Inspection (FAI)	N/A
<input type="checkbox"/>	QC084	Submittal – Resistivity and/or Conductivity Test	N/A
<input type="checkbox"/>	QC085	Submittal – Hardness Test	N/A
<input type="checkbox"/>	QC092	Submittal – Functional/Proof Test Report	N/A
<input type="checkbox"/>	QC093	Submittal – Calibration	N/A
<input type="checkbox"/>	QC096	Submittal – Material Safety Data Sheet	N/A
<b>Check Off</b>			<b>Number of Sheets</b>
<input type="checkbox"/>	List Non-conformance #'s:		N/A
<input type="checkbox"/>	List Recap's:		N/A
<input type="checkbox"/>	List LOLI's:		N/A
<input type="checkbox"/>	List SDRL's:		N/A
<input checked="" type="checkbox"/>	Other: Waivers W4865-008B (SDT 16-U-018263), W4865-004A (SDT 16-U-018258); MRR 4865O-011 (SDT 16-U-019216); C-DR 4865O-004 (SDT 16-U-019793); ARs-0136, -0141, -0142		SDT
<b>TOTAL NUMBER OF SHEETS IN THIS PACKAGE</b>			SDT
<b>Above Documents Reviewed By:</b>			
Mike Shumaker  Name		 Signature	 Date

**Note:** Documents with more than one sheet must be paginated. When more than one sheet of each document type is submitted, the required Clause Number must be recorded on the upper right hand corner of the first sheet.

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**If Found, Return to Receiving**