REQUEST FOR DEVIATION/WAIVER (RFD/RFW							1. DATE (YYMMDD) 16/07/11			From Approved OMB No. 0704-0188				
Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, guthering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Washington Headquarters Services, Directorate for information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-430 and to the Office of Management and Budget, Paperwork Reduction Project (1074-0188), Washington DC 2003.									subcring and	2. PROCURING ACTIVITY NUMBER				
PLEASE <u>DO</u> 1	NOT RET	URN YOU	R COMPL	ETED FORM	TO EIT	THER OF TH	ESE A	ADDRE	SSES.	3. DODAAC				
RETURN CO	MPLETE	D FORM T	O THE GO	DVERNMENT	ISSUI	IG CONTRA	CTIN	G OFF	ICER	1				
FOR THE CO	NTRACT	/PROCURI					[2 OF	THIS	FORM.	1				
4. ORIGINATOR				b. ADDRESS (Street no., City, State, Zip Code)					5. (X					
a. TYPED NAME (First, Middle Initial, Last)			'	7500 Innovation Way						DEVIATION	X	WAIVER		
L-3 Cincinnati Electronics			[]	Mason, Oh 45040						6. (X	(one)	X	MINOR	
										\Box	MAJOR	Н	CRITICAL	
7. DESIGNATION FOR DEVIATION /WAIVER							8. BASELINE AFFECTED		9. OTHER SYSTEM/CONFIGU-					
a. MODEL/TYPE	b. C.	AGË CODE	c. SYS. DESIG. d., DEV/WAIVER NO.				FUNC- TIONAL CATED				RATION ITEMS AFFECTED			
OCU	90	0.45			XX740.		I HORAL L		CATED	⊢			_	
	801	045			W480	5-004A		PRODUCT		1				
1F67700-1									1			Ī		
1F6770-501								1		J	1			
1F67700-503														
10. TITLE OF DEV			45.41.4.4											
Waiver to allow	w use of E	M1 Inducto	r (P/N 1F0	11008) Lot Dat	te Code	1506 on OCL	J CMS	Module	es (P/N 1F	67740	-1 & 1F67	740- <u>5</u>	01)	
11. CONTRACT N	UMBER AND	LINE ITEM				12. PROCURING CONTRACTING OFFICER								
						a. NAME (First	, Middle	Initial, La	st) Shawi	ı Man	ıley			
4500030494	, Line Ite	ms 46, 47	. 48			b. CODE c.			TELEI	PHONE NO	513-57	3-6194		
		-												
13. CONFIGURATI		OMENCLATUR	LE			14. CLASSIFICATION OF DEFECT								
OCU CMS M	lodule					a. CD NO. b. DEFECT NO. c. DEFECT CLASSIFICATION								
									х	MIN	OR MA	JOR [CRITICA	
15. NAME OF LOWEST PART/ASSEMBLY AFFECTED						16. PART NO. OR TYPE DESIGNATION								
ACT OF THE	OCU CMS Module						1F67740-1 and 1F67740-501							
	June	_					WIIGH I	20//10						
17. EFFECTIVITY		(5) 7 . 0.00 1	4.4					ECURRIN	G DEVIATION	$\overline{}$			-	
17. EFFECTIVITY OCU CMS 1F		(SNs 0004 a	and above), 1F6740-501	(SNs (/WAIVI	ER NO			
17. EFFECTIVITY OCU CMS 1F above)	67740-1	(SNs 0004 a	and above), 1F6740-501	(SNs (0001 and	18, R)	ECURRIN YES	G DEVIATION	$\overline{}$				
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24. CORRECTIVE ACTION TAKEN									
= 12			eakening in the bond between the two cores rective actions will be performed.						
CORRECTIVE ACTION FOR FUTURE PROCU	JREMENT LOTS								
a. Parts will be manufacture	a. Parts will be manufactured with additional epoxy or new epoxy								
b. The new lot (future procu	b. The new lot (future procurement) will be fully tested/qualified								
c. From initial test results the use of additional epoxy has yielded good results									
25. SUBMITTING ACTIVITY									
a. TYPED NAME (First, Middle Initial, Last) Carlos Barrera	ь. титье Quality Enginee	er	c. SIGNATURES						
26. APPROVAL/DISAPPROVAL	a. RECOMMEND	APPROVAL	DISAPPROYAL						
b. APPROVAL APPROVED DISAPPROVED	c. GOVERNMENT ACTIVITY								
d. TYPED NAME (First, Middle Initial, Last)	e. SIGNATURE	f. DATE SIGNED (YYMMDD)							
g. APPROVAL APPROVED DISAPPROVED	h. GOVERNMENT ACTIVITY								
i. TYPED NAME (First , Middle Initial, Last)	j. SIGNATURE	k. DATE SIGNED (YYMMDD)							

DD Form 1694, NOV 96 (Computer Generated)