

# On Site Activity Report



## Customer Address

Customer **Infineon Technologies Nijmegen BV**  
Department  
Address  
Zip/City **Nijmegen**

## Customer Contact

Contact Person **Bhagath Talluri,**  
Phone **31651651880**  
Fax  
Email [bhagath.talluri@infineon.com](mailto:bhagath.talluri@infineon.com)

**Keysight Order Number**      **Service Request**  
**4275842**                    **1-17810589363**

## Customer Order Number

**Keysight\_PO\_IFX\_Nijmegen\_17052022**

Date	Hours	Activities e.g ( Consulting, Education, Product Assistance)
		<b>Consulting</b> <b>PS-S20-PNA</b> <b>Startup assistance, daily on N5242B</b>

Your Signature will be considered as the deemed authorization to conclude any activity related to your service request as per the terms of your contract or PO.

## Technical consultant

**Xavier ALLART**

**Signature Technical Consultant**

A handwritten signature in black ink, appearing to read "Xavier Allart".

## Customer contact

**Customer Signature**

**2022/11/08**

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Signature

Date

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Signature

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Date