

REDACTED

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Search for the word "your" throughout doc and replace as required

Add to Cart

Service Quality Manual

(mo/yr)

Revisions			Rev:	
Letter	E.O. Number	Description	Date	
Used On	Contract#:	Your Co Name		
Prepared By:				
		Quality Policies		
		Your #		
				1 of 7

Your Logo

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Your Co Name	REV	CAGE	DOC#:	2 of 7 Your #
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1.0 SCOPE

This quality manual establishes the scope of effort required to deliver the services described herein for (Your Service). (Your Co) will supply all the facilities, equipment, personnel and management skills required to perform the tasks identified in the purchase order.

1.1 Definitions

(Your Definitions)

2.0 APPLICABLE DOCUMENTS

The documents listed below apply to the extent specified herein or in the purchase order. In the event of conflict between documents, their order of precedence is: Purchase Order, (then Your Docs), then applicable lower tier documents.

2.1 (Your Docs, e.g., workmanship standards...)

3.0 EQUIPMENT

3.1 Your list of equipment

4.0 MATERIALS

4.1 Your list of materials

5.0 REQUIREMENTS

5.1 Services

(Your Service/Items)

5.1.1 Delivery Schedule

(Your Schedule Commitment for each service activity, e.g., number of minutes, or hours, or days, etc.)

5.1.2 Quality

The service must conform completely to the purchase order and be subject to all Customer requests according to (Your Workmanship Std). While meeting the requirements in section 5.1, (Your Co) will also make a reasonable attempt to keep to a minimum the number of different (Your List).

5.1.3 Documentation

Service documentation is summarized in Table 1. (Your Co) will prepare and deliver all documents listed in Table 1. Documents fall into two categories: "approval," the initial submittal and all subsequent changes require approval of the Customer prior to implementation, and "Review," this documentation is delivered to the Customer for information purposes only.

Table 1

Your Co Name	REV	CAGE	DOC#:	3 of 7
			Your #	

5.1.4 Equipment

Sufficient equipment will be available for [REDACTED]

5.2 Special Requirements

(Your Co) will provide a listing of [REDACTED]

5.3 Organization

(Your Co) will assign and organize personnel as required to [REDACTED]

5.3.1 Meetings and Reviews

A minimum of three (3) hours notice for (Your requirement) is required for all meetings and reviews identified in section 5.3.1.1 through 5.3.1.6 (the use of the following paragraphs is subject to the type of service organization you operate – tailor or delete them as required).

5.3.1.1 Status Reviews

(Your Co) will arrange meetings with the Customer or their Representatives for the purpose of [REDACTED]

5.3.1.2 Customer Meetings

The Customer reserves the right to call a special meeting at (Your Co) to [REDACTED]

5.3.1.3 Acceptance Meeting

(Your Co) will schedule an Acceptance Meeting for the purpose of [REDACTED]

5.3.1.4 Inspection Points

Mandatory Inspection Points during the service will be conducted.

5.3.1.5 Mandatory Inspection

A Mandatory Inspection Point is required before a service activity [REDACTED]

5.3.1.6 Readiness Review

(Your Co) will conduct a Review to demonstrate the overall production readiness of the service activity prior to starting the operations. The objectives are to [REDACTED]

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[Redacted]

5.4 Program Control

(Your Co) will employ production controls in a manner that will assure prompt and accurate schedule control. Appropriate levels of management will [Redacted]

[Redacted]

5.4.1 Milestones for Planning and Reporting

Typical service activity milestones for planning and progress reporting are listed in Table 2. Actual milestones used should be consistent with the scope of the service activity.

Table 2

5.4.2 Change Control

Services will be performed according to controlled procedures. The procedures will be made available for review by the Customer and [Redacted]

[Redacted]

5.4.3 Service Records

(Your Co) will maintain a service log and appropriate documentation for each service activity that [Redacted]

[Redacted]

5.4.4 Damage Reporting

Damage that occurs during a service activity will be reported to the Customer or their Representative with corrective and preventive recommendations in writing within [Redacted]

[Redacted]

[Redacted]

Your Co Name	REV	CAGE	DOC#:	5 of 7
			Your #	

5.4.5 Workmanship

Workmanship standards for the service will be produced that [REDACTED]
[REDACTED]

6.0 SERVICE VERIFICATION

6.1 Records

Service records and visual conformity will [REDACTED]
[REDACTED].

6.1.1 In-Process Service Verification

Verification of compliance with certain in-process service activities can [REDACTED]
[REDACTED]

6.2 Acceptance

Final acceptance of all service activities shall be deemed to have occurred when [REDACTED]
[REDACTED]

6.2.1 Items of Approval by the Customer

Approval as specified herein, does not relieve (Your Co) from [REDACTED]
[REDACTED]

6.2.2 Customer Review and Surveillance

The work activities, operations and documentation of (Your Co), subcontractor's, and suppliers are subject to [REDACTED]
[REDACTED]
[REDACTED]

7.0 REPORTING

7.1 Reports

(Your Co) will submit a letter-type progress report covering progress from [REDACTED]
[REDACTED] and includes:

- a. [REDACTED]
- b. [REDACTED]
- c. [REDACTED]
- d. [REDACTED]

Your Co Name	REV	CAGE	DOC#:	Your #	6 of 7
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8.0 ENVIRONMENTAL CONTROL

Adherence to applicable federal, state, local, and (Your Co) environmental, health and safety requirements is mandatory.



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Service or Build-to-Print Quality Manual

(mo/yr)

Revisions			Rev:	
Letter	E.O. Number - Description	Date		
Used On	Contract#:	Your Company Name		
Prepared By:				
		Your Policy Name		
		Your #		
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1.0 Purpose

Assure conformance to Customer requirements using a documented inspection system that plans and organizes work functions to prevent and detect unsatisfactory conditions at the earliest practical point. Ensure designs permit and facilitate producibility, repeatability, inspectability and related quality requirements.

2.0 Buyer Surveillance

The Buyer may witness any or all work performed at (Your Co) as part of the terms and conditions of the contract subject to a mutually agreed upon date for each visit. Actions by the Buyer may determine whether the requirements of this Policy are met and contract items are of satisfactory quality and meet the intended design or use. The Buyer will be notified at least three (3) business days in advance of the start of work and final examination of the end item. The Buyer may delegate surveillance activities.

3.0 Control of Procurement Sources

Records of inspections and tests performed at Suppliers are available for review by the Customer. The requirements of this Policy are imposed on Suppliers to ensure the quality of their products. Inspections performed at the Supplier's facility do not relieve (Your Co) of the responsibility to deliver conforming articles.

4.0 Identification, Handling and Storage

Adequate methods and facilities are established for controlling the identification, handling and storage of deliverable items. These controls

[Redacted]

5.0 Configuration Control

A configuration control program is established to control the configuration of components. Technical documentation, such as

[Redacted]

5.1 Drawing and Change Control

(Your Co) ensures that deliverable items are fabricated, inspected and tested to the latest drawing or specification. All approved changes are

[Redacted]

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Class I changes are submitted to the Buyer for review. Class I and Class II changes are defined as:

Class I - [REDACTED]

Class II - [REDACTED]

6.0 Inspections and Tests

Inspections and tests are performed to ensure that all supplies conform to applicable drawings and specifications with respect to [REDACTED]

[REDACTED]

6.1 Retest

When deliverable supplies are changed, the items involved are [REDACTED]

7.0 Indication of Inspection Status

(Your Co) maintains a system for indicating the inspection status of articles. This is accomplished by [REDACTED]

8.0 Process Control

(Your Co) establishes inspections and controls over processes as necessary to ensure compliance with quality requirements. These processes include [REDACTED]

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[Redacted]

8.1 Workmanship

Workmanship is of the highest standards according to [Redacted]

8.2 Contamination Control

(Your Co) controls contamination of manufacturing operations to eliminate possible particulate matter that could be detrimental to [Redacted]

[Redacted]

9.0 Nonconforming Material Control and Corrective Action

(Your Co) controls nonconforming items to prevent their use as articles offered for delivery.

Nonconforming items are [Redacted]

[Redacted]

Your Company Name	REV	CAGE	DOC#:	Your #	5 of 7
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9.1 Waivers

(Your Co) provides documentation to the Buyer for all requests for waivers for nonconforming materials or processes. Documentation provides sufficient information to [REDACTED]

10.0 Preservation, Packaging, Packing and Shipping

(Your Co) maintains adequate control of packaging, packing and shipping to ensure that the quality of the fabricated items is maintained and that [REDACTED]

11.0 Acceptance Data Package (ADP)

An ADP is prepared and delivered for each end item delivered to the Buyer, as applicable. The ADP may contain the following items:

- a. [REDACTED]
- b. [REDACTED]
- c. [REDACTED]
- d. [REDACTED]
- e. [REDACTED]
- f. [REDACTED]
- g. [REDACTED]
- h. [REDACTED]

12.0 SAFETY

12.1 General

(Your Co) maintains a safe and healthy work environment and has a safety program that establishes [REDACTED]

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12.2 Hazard Identification

(Your Co) provides a systematic approach to identify, eliminate and control hazards associated with the design to protect the life, health and physical well being of personnel. Hazardous operations are assessed to [REDACTED]

The analysis considers the following:

- a. [REDACTED]
- b. [REDACTED] uirements.
- c. [REDACTED]
- d. [REDACTED]

Identified hazards that could [REDACTED]

12.3 Hazardous Materials

Personnel handling hazardous materials are instructed as to the hazard associated with their use and in [REDACTED]

[REDACTED]

[REDACTED]

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Quality Policy

Mo/Yr

Revisions		Rev:	
Letter	E.O. Number - Description	Date	
Used On	Contract#:	Your Company Name	
Prepared By:		QUALITY POLICY	
		QA-1001-1	
			1 of 2

Your Company Logo

It is a policy of the Company to

[REDACTED]

It is a goal of the company to

[REDACTED]

The Company's Mission is to

[REDACTED]

The Company's Vision is to

[REDACTED]

The Company will design and maintain an effective and economical quality program, covering

[REDACTED]

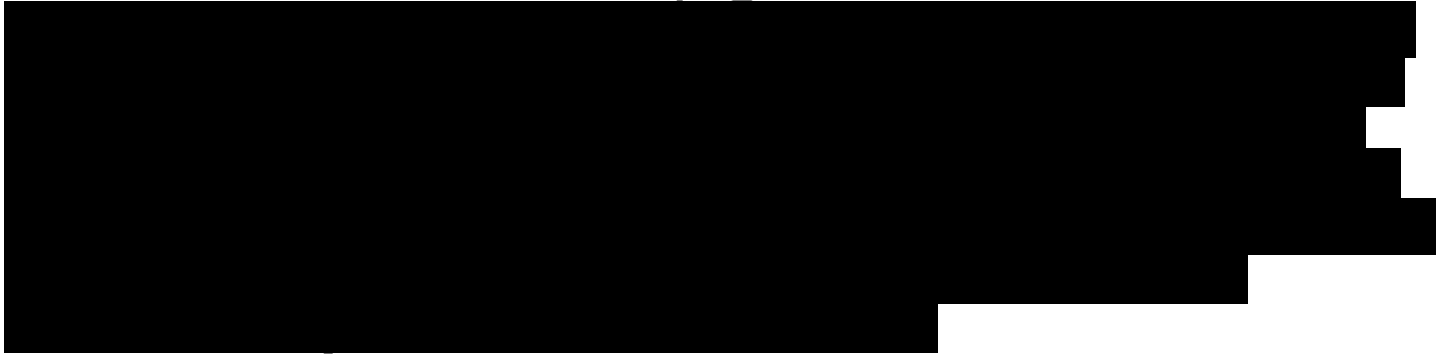
This quality program was developed in coordination with all the Company administrative and technical processes and applies to supplies and services produced at the Company or at any other source to the extent necessary to assure conformance to contractual requirements.

[REDACTED]

Your Company Name	REV	CAGE	DOC#:	2 of 2
			QA-1001-1	

CERTIFICATE OF TEST

PO No:		Quantity:	
P/N:		P/N Rev:	
P/N Name:		Item No:	
Mfr's Lot No if Used:		PO No. to Mfr if Used:	
[Redacted]		[Redacted]	
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]
[Redacted]	[Redacted]	[Redacted]	[Redacted]



Authorized Representative

Title

Date

Your Form# (mo/yr)



Your Logo
Address
Phone, Fax, etc

CERTIFICATE OF COMPLIANCE

To:
Purchase Order #:
Part Number:
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Your Form# (mo/yr)

[REDACTED]

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ADMINISTRATIVE		Yes	No	N/A
1)	Does the facility have a Quality Control Manual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	Is there an organization chart defining the quality functions and responsibilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RECEIVING				
1)	Does receiving inspection check all incoming materials against purchase order requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	Are incoming materials clearly identified to applicable purchase order or material certification?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	[REDACTED]	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FINAL ACCEPTANCE				
1)	Is final inspection performed by Quality Control personnel or under their supervision?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	Are products inspected to relevant and current drawings and specifications?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	[REDACTED]	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
	[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DRAWING AND CHANGE CONTROL				
1)	Are adequate controls in effect to ensure applicable engineering drawings, change notices, and specifications are in use by both production and inspection personnel?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2)	Is an adequate system for control of customer furnished drawings in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3)	[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	[REDACTED]	--	--	--

TOOL AND GAGE CONTROL			
1) Does the calibration system meet Mil-Std-45662A or equivalent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Is there a calibration recall system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Are employee-owned tools used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CORRECTIVE ACTIONS			
1) Is a corrective action system in place?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Is the root cause of a non-conformance determined?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Is a corrective action request issued to a supplier when a quality problem exists on procured materials or services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) [REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NON-CONFORMING MATERIAL CONTROL			
1) Are written rejection forms used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) [REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SAMPLING INSTRUCTIONS			
1) Is inspection performed using sampling plans?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Is the sampling plan in accordance with ANSI/ASQC Z1.4 or ANSI/ASQC Z1.9?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[REDACTED]	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PROCUREMENT CONTROL			
1) Does a system exist for evaluation of your supplier's quality system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Are quality performance records maintained for vendors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) [REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PACKAGING AND SHIPPING			
1) Is the shipping department informed of customer packaging and shipping requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) [REDACTED]	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[REDACTED]

Your Company Name and Logo

Date

(Your Co name) has made a commitment to our Customers to become ISO [REDACTED]

Thank you for your support,

(Your Signature)
(Your printed name)

[REDACTED]

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CUSTOMER PERCEPTION SURVEY

(Your Co name)

Customer Name:		
Completed By:		Date:
Please rate the following items from 0 to 10 (0 = Bad and 10 = Excellent)		
1)	Score	Satisfaction
a)		Cooperation
b)		Customer Representative support
2)	Score	Performance
a)		Accessibility (personnel / facility / suppliers)
b)		Cooperation
c)		Delivery
3)	Score	Competitiveness
a)		Cooperation
b)		Negotiation
c)		Plant capacity
4)	Score	Prediction
a)		Continued business
Comments:		

Thanks again for your support
 Please Fax the completed survey to: (Your Name and Fax#)

Your Form# (mo/yr)



Sheet <input type="checkbox"/> of <input type="checkbox"/>		Product Release Record			PRR#		Your Logo	
Supplier#		Contract#		PO#		Requisition#		
Supplier Name		Program Name		Part Name		PN		
Address		Buyer Name		Specification#		Revision		
		Phone#:		Revision:		S/N – Lot#:		
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Your Form# (mo/yr)

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Drawing No:	RECEIVING INSPECTION REPORT											
Item Name:	Your Co											
1												
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Your Logo

QC-114-1 (mo/yr)

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Your Logo	Receiving Inspection Instructions		QC-114 (mo/yr) Page 1 of 1
	Special Instructions: ANSI Z 1.4; Level I reduced, AQL 1.0 Die-controlled = 5/lot Commercial or items >50Lbs = 1/Lot	Specification:	
		Specification:	
		Approval:	

Oper	Qty	Description of Inspection Operation	Gage	Comment
R&I	---	Op 1: [Redacted]		
		Op 2: [Redacted]		
		Op 3: [Redacted] ent		
		Op 4: [Redacted] t		
		Op 5: [Redacted]		
		Op 6: [Redacted]		
		Op 7: [Redacted]		
		Op 8: [Redacted]		
		Op 9: [Redacted]		
		Op 10: [Redacted]		
		Op 11: [Redacted]		
		Op 12: [Redacted]		
		Op 13: [Redacted]		
		Op 14: [Redacted] plies		
		Op 15: [Redacted]		
		Op 16: [Redacted]		
		Op 17: [Redacted]		

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Your Logo	Your Co Name Address City - State - Zip Phone - Fax - Email
-----------	--

REQUEST FOR QUOTE	No:
--------------------------	-----

To:	Supplier Name	Date:	
	Street	Phone:	
	City, State	Fax:	
	Zip	Email:	

This request for quote (RFQ) is subject to the terms and conditions of the purchase order and requirements defined herein.

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Requirements: (define engineering / quality requirements here)

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