

VENDOR INSPECTION REPORT

VENDOR			PART NAME	GOODRICH PAR	T NUMBER	REV.			
INSPECTORS NAME		DATE	GOODRICH VERIFICATION	DATE	PURCH. ORDI	ER NO.			
QTY RECEIVED	SAMPLE SIZE		QUANTITY INSPECTED						
			VENDOR	GOODRICH					

INSTRUCTIONS:

- 1. COMPLETE THIS FORM FOR EACH LOT SHIPPED
- 2. PLACE FORM IN PACKAGE WITH MATERIAL

3. MARK OR TAG EACH PART MEASURED WITH A NUMBER AND THE RESULTS ENTERED BELOW

	SERIAL/LOT NO.													
		MEASUREMENT		MEASUREMENT		MEASUREMENT		MEASUREMENT		MEASUREMENT		MEASUREMENT		
ITEM	CHARACTERISTIC	ZONE	VENDOR	GOODRICH	VENDOR	GOODRICH								
	VMRR/NMN NO.													
Enter actual readings for all 1. Dimension with a tolerance of 3. Surface finish of 32 RMS or 5. Special test data (e.g. leak rate, transmissibility, etc.).								PAGE	OF					

critical characteristics as follows: Enter (√) for all non-critical characteristics

2. Angles with a tolerance of ± one (1) degree or less.

4. Hardness values.

6. All electrical parameters.