CERTIFICATE OF CONFORMANCE

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| SUBCONTRACTOR / SUPPLIER | ADDRESS | CITY | POSTAL/ZIP CODE | PROVINCE/STATE & COUNTRY |

CERTIFY THAT THE PRODUCT DELIVERED HAS BEEN INSPECTED AND TESTED AND IS IN CONFORMANCE WITH ALL APPLICABLE DRAWINGS, SPECIFICATIONS AND REQUIREMENTS OF THE PURCHASE ORDER AND THAT DATA TO SUBSTANTIATE THIS STATEMENT IS AVAILABLE ON FILE AND TRACEABLE TO THE ITEM WHICH SUCH DATA COVERS.

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| CUSTOMER: | **INDAL Technologies** |
| INDAL PURCHASE ORDER: |       | REVISION:  |       |
| COUNTRY OF ORIGIN: |       |  |  |

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| **PO Line Item** | **INDAL P/N** | **Rev +ECR ECN** | **Supplier P/N** | **Serial, Lot or Date Code** | **Part Description** | **QPL #** | **Deviation/ Waiver** | **Qty.** |
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| FOR SUBCONTRACTOR / SUPPLIER: |       |  |       |
|  | SUBCONTRACTOR / SUPPLIER Q.A. REPRESENTATIVE |  | DATE |