



Number:
SC-FRM-00.CD.4020

Effective Date:
(MM/DD/YYYY)
09/23/2022

Revision:
Original

Directly supports AS9100
Clause(s):
8.4,8.4.2

Subject:

Supplier Certificate of Conformity

| | | | | | | | | | |
|-----------------------------------|-----------------------------|-------------------------------|-----------------|-------------------|--|-----------------------------|---|--|------------------------------------|
| 1 P.O. PART NUMBER | | 2 REV. LETTER Dwg: P/L: | | 3 ENG PART NUMBER | | 4 SUPPLIER NAME AND ADDRESS | | | |
| 5 SUPPLIER CODE | 6 REJECTION DOCUMENT NUMBER | | | 7 QTY. SHIPPED | | 8 PKG. SLIP NO. | 9. QARBRON AEROSPACE P.O. AND ITEM NUMBER | | 10.QARBRON AEROSPACE PLANNING+ REV |
| 11 MATERIAL TYPE AND SPECIFICATIO | | | 12 HEAT/LOT NO. | | 13 IF QARBRON AEROSPACE MAT'L. /REL. NO. | | 14 RAW MATERIAL MANUFACTURERS | | |

LIST IN CHRONOLOGICAL ORDER THE SEQUENCE OF ALL PROCESSES PERFORMED

*Out of Sequence processes performed must be permitted and/or approved and noted on the COC

| 15 PROCESS PERFORMED | 16 SPECIFICATION | REVISION | EFFECTIVE DATE OF SPECIFICATION | 17 DATE PERFORMED *See Sequence Note | 18 SUPPLIER NAME AND ADDRESS WHERE PROCESS PERFORMED | 19 APPROVAL NO. |
|----------------------|------------------|----------|---------------------------------|---|--|-----------------|
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|---|------------------------|---|--|-----------------------------|---|
| 20 REMARKS | | <p>We hereby certify that the product order under this P.O. complies and was manufactured in accordance with applicable Engineering drawing(s), specification(s), and Purchase Order requirements. Seller Quality Assurance department has inspected the parts and they adhere to all contract requirements, applicable drawings and/or specifications</p> | | | |
| 21 HARDNESS | 22 ELECT. CONDUCTIVITY | 23 QTY. TESTED | | 24 GRAIN DIRECTION VERIFIED | 28 QUALITY MANAGER OR AUTHORIZED DESIGNEE |
| S/B: | S/B: | HARDNESS: | | | SIGNATURE |
| ACTUAL: | ACTUAL: | ELECT. COND: | | | DATE |
| 25 QARBRON AEROSPACE (inclusive of C/L source) or SUPPLIER ACCEPTANCE STAMP | DATE | 26 LIST SERIAL NO'S. IN PROPER SEQUENCE WHEN APPLICABLE | | | |
| | | 27 PURCHASE ORDER QUALITY CLAUSES/NOTES | | | PRINT OR TYPE NAME |

Do not leave any boxes blank, if an item is not applicable enter 'NA'



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CERTIFICATE OF COMPLIANCE INSTRUCTIONS

1. Enter part number and dash number as it appears on the Purchase Order.
2. Enter the latest revision letter of the engineering drawing/model and applicable engineering order change number/letter. Also include revision of applicable drawing parts list. If the P.O. number is a planned “kit” then this block is not applicable.
3. If the part number listed in block 1 is a synthetic (i.e., planning configuration assigned number) number then enter the engineering equivalent part number, otherwise mark N/A. If there is no equivalent eng. Dash number then enter the drawing base number only. If the P.O. number is a planned “kit” then this block is not applicable.
4. Enter supplier name and address.
5. Enter Qarbon Aerospace assigned supplier code number (six digits numeric).
6. Enter all applicable completed Qarbon Aerospace rejection tag number(s) (i.e., SMRR or for 787 program the Wonderware tag no.). Use Block 20 for additional tag entries.

Note: If traveling work to a Qarbon Aerospace site on an open rejection tag do not use this form. Obtain and complete Form CD4020B.

7. Enter quantity shipped.
8. Enter supplier’s packing slip or shipping document number.
9. Enter the Qarbon Aerospace. and item number applicable to shipment.
10. Enter the latest Qarbon Aerospace planning revision number to which the supplier is manufacturing and processing to (include manufacturing plan approval numbers and date when applicable.) For 787 programs include the revision of MARM’s, MRM’s, or MIRM’s as applicable. Use Block 20 if additional space is required.
11. Enter material type (alloy), temper and specification.
12. Enter heat lot number for supplier purchased material.
13. Enter the applicable material release document number when Qarbon Aerospace furnishes material (i.e., JREQ number).
14. Enter the original raw material manufacturer’s name when material is furnished by the supplier.



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15. Enter all customer special processes performed in the order of which the processes were performed. See applicable APPROVAL PROCESSOR LIST as noted in Table 2 of Qarbon Aerospace document. In addition to special processes include all organic coatings applied (e.g., paint).
16. Enter the specific specification number and revision to which parts were processed and effective date as published in the document.
17. Enter the date the process was actually performed.
18. Enter the name and address of the approved processor.
19. Enter the processor approval memo number. This approval number is the certification number that is found on the actual processor test report.
20. Use this area for any additional information or overflow from entries in the other block numbers.
21. Enter hardness requirements (should be) and actual readings (Is, include range).
22. Enter the electrical conductivity requirements (should be) and actual readings (Is, include range).
23. Enter the actual quantity of parts tested for each technique.
24. Indicate if grain direction has been verified when required.
25. Qarbon Aerospace source inspector (inclusive of C/L) applies acceptance stamp Method I, DQN Method 2 and date. If supplier is delegated and CD-4020 is required, then the supplier applies their acceptance stamp and date.

Note: Do not enter a signature or write across stamp.

26. List part serial numbers when applicable.
27. List all P.O. quality clauses/notes.
28. Supplier Quality Manager or authorized designee sign and date, include title and printed/typed name.

Note: Items eleven (11) through nineteen (19) and twenty-one (21) through twenty-four (24) are not applicable for assemblies/sub-assemblies and kits. Items fifteen (15) through nineteen (19) are required when critical processing is accomplished on assemblies/sub-assemblies.



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LIST ADDITIONAL PROCESSES/SPECIFICATIONS AS NEEDED, IF NECESSARY

| 15 PROCESS PERFORMED | 16 SPECIFICATION | REVISION | EFFECTIVE DATE | 17 DATE PERFORMED | 18 SUPPLIER NAME AND ADDRESS WHERE PROCESS PERFORMED | 19 APPROVAL NO. |
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Do not leave any boxes blank; if an item is not applicable enter 'NA'