**Refer QA-PRO-00.21.0100 CMS Operating Instruction and Reporting Requirements for example data and graphics to complete this form.**

**Sheets can be duplicated as needed.**

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| **Company Name** | | | | | | | | **Company Address** | | |
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| CMS Contact Name | | | CMS Contact email | | | | CMS Contact Phone Number | | | |
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| **CMS Inspection Plan** | | | | | | | | | | |
| **Part Number & Revision** | | | | **Description** | | | | **Project** | | **Page** |
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| **CMS Program Number & Revision** | | | | **Remark** | | **Date** | | **Prepared/Stamp** | **Approved** | |
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| **CMS Equipment Brand/Model/Serial#** | | | | **Last Calibration** | **Calibration Exp Date** | | |  |  | |
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| **CMS Software Name** | | | | **Version** |  | | |  |  | |
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| **Name#** | **Type** | **Revision** | | | **Storage** | | | **MBD/DPD Name(s)** | | |
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| **Part Number & Revision** | **Set Up Instruction for :** | | **Page** | **of** |
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| **CMS Program Number & Revision** | **Fixture to Measuring Device Orientation** | **Alignment:** | | |
|  |  | **Primary:** | | |
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| **Part Number & Revision** | **Set Up Instruction for :** | | **Page** | **of** |
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| **CMS Program Number & Revision** | **Part to Fixture Orientation** | **Alignment:** | | |
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| **Fixture/Datum Simulator/Equipment & Rev** | **Datum Simulator Point Map** | **Page** | **of** |
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| **Part Number & Revision** | **Product Features Point Map** | **Page** | **of** |
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