

FROM:

PART. NO. _____

PRL / DCL _____ / _____

MFG. DATE _____

NO. OF PCS. _____

NO. OF CAVITIES _____

PURCHASE ORDER # _____

TO:

 **METHODE ELECTRONICS, INC.**

111 West Buchanan St.
Carthage, IL 62321

☐ DV Samples
(Prototype)

☐ PV Samples
(Supplier PPAP)

☐ Eng. Samples
(Prototype)

Methode Use Only

☐ Approved

☐ Interim

☐ Rejected