First Article Inspection





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Protolabs Network Info	ormation						
Technology		Sub Technology					
Quote		PO					
Part Name		Rev					
Representative Name		Email	Email Phone No.				
MP ID		MP Quality Repres	MP Quality Representative Name				
Presentation to Custon	ner						
Initial Report	Follow up Report						
Qty of Samples Sent	Ship by	Waybill					
Customer Information Company name	Address	z	ip code	City	Country		
Contact person	Department	Phone No.		E-mail			
Protolabs Network Cor	nfirmation						
	nd results of this submission are as of our customer, are manufact anufacturing process.						

	Approved	Approved with conditions, see comments	Rejected	Comments		
Full Dimensional Report						
Material Test Report						
Production Flowchart						
Control Plan						
Overall Decision						
- 5						
For Protolabs Network		For the c	customer			
Signature name		Signatu	re name			
Department		Departn	nent			
Date		Date				
Signature		Signatu	Signature			