

TITLE: Supplier Evaluation		
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RESPONSIBLE DEPT: Purchasing	REF. QMS 7.4.1	

8.5.2 Corrective Action and 8.5.3 Preventive Action

1. What system do you have in place for handling customer complaints? _____

2. What controls are in place to ensure that corrective action is taken and that it is effective? _____

3. What controls are in place to ensure that preventive action is effective? _____

Supplement 1-Counterfeit Avoidance Plan/Policy

1. Does your company have a Counterfeit Parts Avoidance Plan/Policy in place that meets the requirements of SAE AS5553? _____ Describe the plan or attach a copy, if available. _____

2. Are you aware of the K&L Microwave counterfeit Parts Avoidance Plan/Policy? [Available at www.klmicrowave.com under Supply Chain Management tab]. _____

Form Completed by:

Print name	Title
Signature	Date

NOTES:

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Reviewed and approved by: _____ Date: _____