



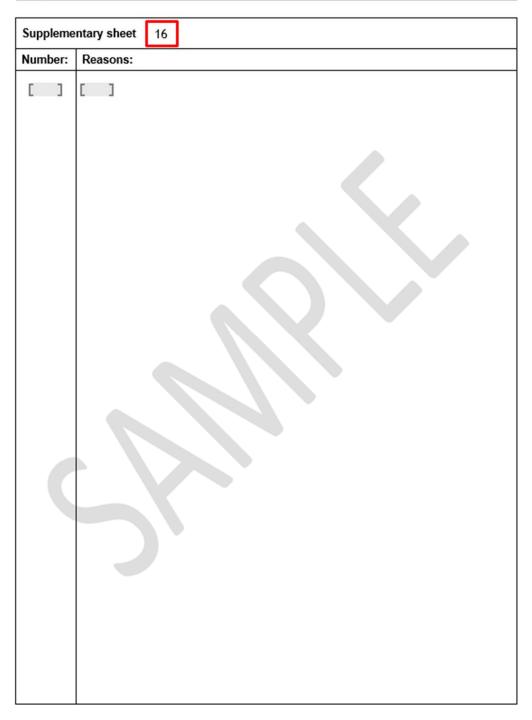
Checklist for sampling - Enclosure 1.1

	Checklist for s	KESSEL						
Recip	pient:	Details of sampling:						
KESSEL AG Bahnhofstraße 311 D-85101 Lenting Germany KESSEL article number KESSEL article description Supplier's article number: Drawing status / date: Change no.:								
Supp	lier:	Remark: 11						
Contac Depart E-mail Phone	tment: 5 4]							
кеqu	ired data and proofs: 12							
Reaso	ons on supplementary sheet if "no"		Yes	No	n/a			
1	Complete sampling documents received from	n Kessel AG?						
2	Read and understood sampling guidelines? sampling")							
3	Test report completed in full and countersign							
3.1	Target values with tolerances and/or actual v							
3.2	Actual values within the tolerance? If "no" see General provisions for sampli							
3.3	Measuring equipment entered?							
3.4	Supplementary sheet on "Contents in bough							
4	Document enclosed for proof of process cap							
5	All packaging units and sample parts labelled							
6	Required Enclosures as noted in the test rep							
Additio	onal information:							
7	Quality criteria for looks, dimensional accura	cy, etc. understood?						
8	Test plan exists?							
9	Process flow chart exists?							
10	Failure Mode and Effect Analysis exists?							
11	The measuring equipment used has been ca							
12	Hazardous substances used? (Hazardous substances with REACH approval)							
Enclose	Enclose "Checklist for sampling with supplementary sheet" with the documents for KESSEL AG!							
	13							
Closing date Name		Sig	nature					













- Recipient's address (KESSEL SE + CO.KG)
- 2. Name of contact person (supplier)
- 3. Department of contact person (supplier)
- 4. E-mail of contact person (supplier)
- 5. Telephone number of contact person (supplier)
- 6. KESSEL article no.
- 7. KESSEL article description
- 8. Supplier's article number (if different from KESSEL article number)
- 9. Drawing status / date
- 10. Change number (if available)
- 11. Remarks section (supplier)
- 12. Required data and proofs (tick where applicable) (supplier)
- 13. Closing date (supplier)
- 14. Name of contact person (supplier)
- 15. Signature of contact person (supplier)
- 16. Supplementary sheet for checklist (if "no", reasons on supplementary sheet)

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Label for sample parts – Enclosure 1.2

Packaging label 1.2.1



Parts label 1.2.2

	Grund der Lieferung: (reason for delivery)	
Teileaufkleber @art saed	Lieferant: (supplier) Artikelnummer KESSEL: (article number KESSEL) Artikelbezeichnung KESSEL: (article description KESSEL) Produktionsdatum: (date of production)	SEL





Test report - Enclosure 1.3

Test report									(IK) I	KES	SE	L	
Recipient:									plin	_				
KESSEL AG						New product / project Product change								
Bahnhofstraße 31 D-85101 Lenting							Shift of production							
							Chan	ge in	the	produ	uction	prod	ess	
Germany							New	sub-	contr	actor				
Supplier:						Re	-sar	sampling:						
[] 2							Complete re-sampling							
							Partia	artial re-sampling						
						Nu	mbe	er of	f sar	mpli	na:	4	7	
Required enclosures: 5													-	
01 Functional test	06 P equipme		f test de pability	evice	and		E	111	11 Appearance					
□ 02 Dimensional inspection	07 L	ist of te	est dev	ices o	r equ	ipmen	nt 🏻	12	Certif	icates	5			
03 Material test	Ø 08 E	C data	safety	shee	t		1			ents in	boug	ght-in	parts	
04 Process capability analysis		aptic				14 Other:								
05 Process flow chart	10 A	cousti	cs		_	_			_					
Details of sampling:		-		_		_							1	
KESSEL article number KESSEL article description	3	,				Inc.	rder call no. / date 11 elivery note no. / date 12 12							
Supplier's article number:		╡				Deli	elivery quantity: [12] Unit: 14]							
Drawing status / date: Change no.:	=	9				San	Sample weight: 15							
Supplier:		7			-									
Contact: 16 []						Ren	nark:	[]					
Department: 18	17					22								
Phone:	19													
Date: [20] Signatu	re: 2	1												
KESSEL decision: 23														
Overall decision:					According to enclosures: 25									
24		1 2	3	4	5	6	7	8	9	10	11	12	13	14
□ Approval	II.													
Approval with measures / condition	II.	3 E	ı	ь		ь	ь		Ы	Ы	Ы	Ы	Ы	Ш
Rejected, corrective measures needed	i ii	3 E		Ш										Ы
Contact: 26	7		Re			Remark:								
Department: 27 E-mail: 28								32						
Phone: 20 Date: 30 Signatu		1												

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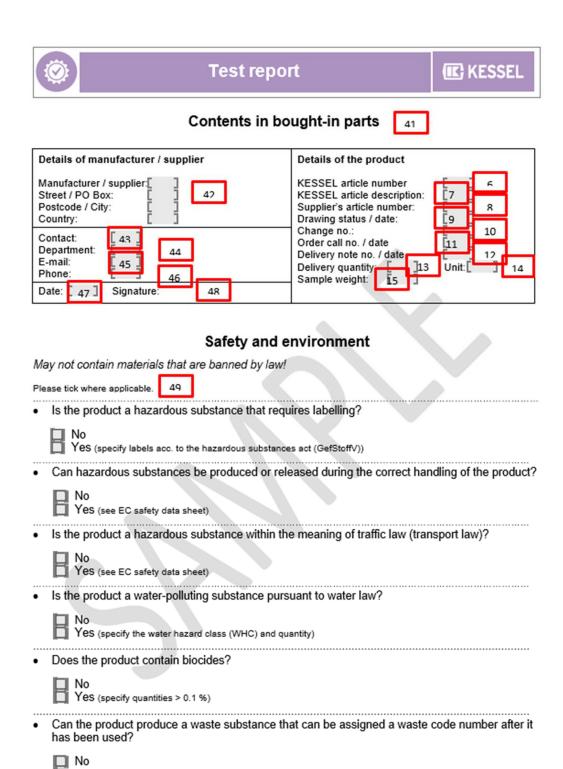


02 D 03 M 04 P 05 P 06 P 07 Li 08 E 09 H 11 A 11 A 12 C	unctional test imensional inspection aterial test rocess capability analy rocess flow chart roof of test device and st of test devices or ec C data safety sheet	Initial sampling: New product / proje Product change Shift of production Change in the prod New sub-contracto Re-sampling: Complete re-sampl Partial re-sampling Number of sampl	uction process							
Assess	sment: 33									
	Su	pplier		KESSEL AG						
	Target values:				Assessment					
no. with		Actual values	Measuring equipment	Actual values						
	tolerances									
- 34	[35	[36	[37	38	39 - 40					

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Yes Yes



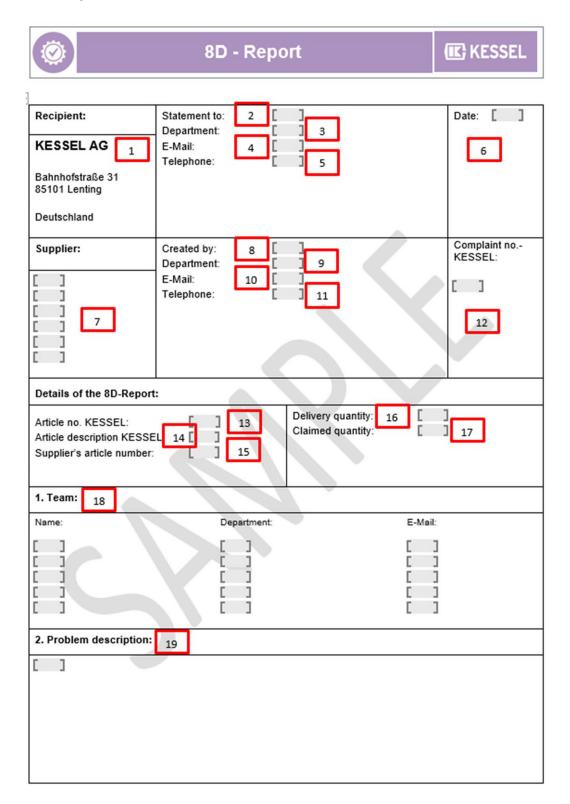


- 1. Recipient's address (KESSEL SE + CO.KG)
- 2. Address of consignor (supplier)
- 3. Reason for preparing the test report (tick on page 1 and 2 of the test report)
- 4. Number of samplings performed
- 5. Enclosures required by KESSEL SE + CO.KG (will be completed by KESSEL SE + CO.KG)
- 6. KESSEL article no.
- 7. KESSEL article description
- 8. Supplier's article number (if different from KESSEL article number)
- 9. Drawing status / date
- 10. Change number (if available)
- 11. Order call number / date
- 12. Delivery note number / date
- 13. Quantity in delivery sent; in case of several cavities, please indicate in (Field 22) "Remarks Supplier"
- 14. Unit specification for delivery quantity
- 15. Specify the weight of a single sample in grams
- 16. Name of contact person (supplier)
- 17. Department of contact person (supplier)
- 18. E-mail of contact person (supplier)
- 19. Telephone number of contact person (supplier)
- 20. Creation date of test report
- 21. Signature of contact person (supplier) (confirms that the data in the test report is correct)
- 22. Remarks section for supplier for additional information (e.g. cavity, tested standards, etc.)
- 23. Decision section overall test report (will be completed by KESSEL SE + CO.KG)
- 24. Overall decision for test report
- 25. Decision according to required enclosures
- 26. Name of contact person (KESSEL SE + CO.KG)
- 27. Department of contact person (KESSEL SE + CO.KG)
- 28. E-mail of contact person (KESSEL SE + CO.KG)
- 29. Telephone number of contact person (KESSEL SE + CO.KG)
- 30. Processing date of test report
- 31. Signature of contact person (KESSEL SE + CO.KG)
- 32. Remarks section (KESSEL SE + CO.KG)
- 33. Assessment of sampling
- 34. Consecutive numbering of the required specifications (for complex components (drawings with sub-drawings) make sure that consecutive numbers are not issued twice) (supplier)
- 35. Target values and tolerances according to specifications including unit specification (supplier)
- 36. Actual values for measured specifications (supplier)
- 37. Measuring equipment used to measure the respective actual values (supplier)
- 38. Actual values for measured specifications (KESSEL SE + CO.KG)
- 39. Assessment by "X" for OK parts (KESSEL SE + CO.KG)
- 40. Assessment by "X" for NOK parts (KESSEL SE + CO.KG)
- 41. Supplementary sheet on "Contents in bought-in parts" (complete if applicable)
- 42. Address (manufacturer / supplier)
- 43. Name of contact person (manufacturer / supplier)
- 44. Department of contact person (manufacturer / supplier)
- 45. E-mail of contact person (Manufacturer / supplier)
- 46. Telephone number of contact person (manufacturer / supplier)
- 47. Creation date of test report (manufacturer / supplier)
- 48. Signature of contact person (manufacturer / supplier) (confirms that the data in the test report is correct)
- 49. "Safety and environment" details (tick where applicable) (manufacturer / supplier)





8D-Report - Enclosure 1.4









8D - Report

KESSEL

3. Immediate action: 20	Yes	No	Responsible	Date				
3.1 Current production blocked and checked	П	Ь	erson 21]	[22]				
3.2 All finished goods blocked and checked			[]	[]				
3.3 Storage raw material blocked and checked			[]	[]				
3.4 Increased pre-shipping inspection			[]	[]				
3.5 Department heads are informed about the defect patterns				[]				
3.6 Analysis of provided samples and internal processes		П						
Specific marking of parts, box labels and pallet labels to be applied								
Further immediate action performed: Results of immediate action:								
4. Failure causes: 24								

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8D - Report

KESSEL

5. Planned corrective measures: 25			Responsible person	Date
[]			- 21 -	- 22
6. Implemented corrective measures:	6		Responsible person	Date
[]			[]	[]
			21	22
7. Preventive measures: 27				
Modification required?	Yes	No	Responsible person	Revision date
7.1 Working instruction			21	I 22 I
7.2 Working plan			[]	[]
7.3 FMEA for product, process, design			[]	[]
7.4 Test instruction			[]	[]
7.5 Test plan			[]	[]
7.6 Packing instruction			[]	[]
7.7 Modification of drawing			[]	[]
7.8 Failure prevention (PokaYoke)			[]	[]
7.9 Employee training			[]	[]





ØD - Report						KESSEL	
Further preventive	measures:	28	1				
[]		20					
8. Efficacy of the n	neaeuree.	20		Yes	No		
8.1 Successful check		29				Checked by	Date
Other remarks:	30						- 22
[]				1			
			_	_			
Closing date		-		2 ime			33 Signature

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- Recipient's address (KESSEL SE + CO.KG)
- 2. Name of contact person at KESSEL SE + CO.KG for the statement (to be completed by the supplier)
- 3. Department of contact person at KESSEL SE + CO.KG (to be completed by the supplier)
- 4. E-mail of contact person at KESSEL SE + CO.KG (to be completed by the supplier)
- 5. Telephone number of contact person at KESSEL SE + CO.KG (to be completed by the supplier)
- 6. Date
- 7. Supplier's address
- 8. Name of creator (supplier)
- 9. Department of creator (supplier)
- 10. E-mail of creator (supplier)
- 11. Telephone number of creator (supplier)
- 12. KESSEL SE + CO.KG complaint number (to be completed by supplier)
- 13. KESSEL article no.
- 14. KESSEL article description
- 15. Supplier's article number (if different from KESSEL article number)
- 16. Delivery quantity
- 17. Quantity complained about
- 18. All employees from the corresponding team (name, department, e-mail)
- 19. Description of the problem
- 20. Immediate actions (please tick where applicable)
- 21. Name of person responsible (supplier)
- 22. Date
- 23. Details of further immediate action and results of the immediate action
- 24. Failure causes
- 25. Planned remedial measures
- 26. Established remedial measures
- 27. Measures against repeated failures (tick where applicable)
- 28. Details of further measures against repeated failures
- 29. Efficacy of measures (tick where applicable)
- 30. Other remarks (supplier)
- 31. Closing date (supplier)
- 32. Name of creator (supplier)
- 33. Signature of creator (supplier)

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