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| SUPPLIER CERTIFICATE OF CONFORMANCE |
| **Purchase Order Data** |  **Purchase order** |       |  | **Line Item No (s)** |       |  |
|  **Part Number** |       |  |  **Revision** |       |  | Quantity |       |  |
|  **Description** |       |  |
|  |  |
| **Serial & Lot Data** |  **Serial No (s)** |       |  |
|  **Lot No(s)** |       |  |
|  |
| **Sampling Data** |  **Sampling Inspection** |  **Sampling Plan** |  |       |  |
|  |  |  |  |  |
|  **[ ]**  **Yes** **[ ]**  **No** |  **ACL** |  |       |  |
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| Specification**Data** |  **Reference Specification(s):** |       |  |
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|  |
|  **Country of Origin** |  |  |
| **[ ] U.S. [ ] Can [ ] Mex****I** | **[ ]**  **Other (specify)** |       |
| **If U.S., Canada, or Mexico – does shipment qualify for USMCA? [ ] Yes [ ]  No****If Yes, attach USMCA Qualifying Data - Cubic Form F-020** |
| **CERTIFICATION****I do hereby certify that the products and/or services listed above are of the quality specified and conform to all requirements of the purchase Order, including: Quality Control Clauses, Design specifications, drawings, preservation, packaging, packing, marking, and physical identification requirements.** |
| **Supplier Data** |  Company Name |       |  |
|  **Address** |       |  |
|  **City** |       |  | State |       |  | Zip |       |  |
|  **Name & Title Of Company** **Quality Representative** |       |  |
|  | **(Please Print Or Type Name & Title)** |  |
|  **Signature Of Company** **Quality Representative** |  |  | Date |  |  |
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| **Instructions for Completion of**Cubic Form F-007 |
| Purchase Order DataPurchase Order: Enter the Cubic Purchase Order Number for the product supplied in this shipment.Line Item No (s): Enter the Cubic Purchase Order Line Item Number for the product supplied in this shipment. It is permissible to have this Certificate of Conformance cover multiple line items as long as the part numbers and lot data are the same.Part Number: Enter the part number for the product supplied in this shipment. The part number should match exactly the part number on the Cubic Purchase Order.Revision: Enter the revision letter for the product supplied in this shipment. The revision letter should match exactly the Revision Letter on the Cubic Purchase Order.Quantity: Enter the quantity of the product supplied in this shipment. Note the quantity shown in here shall only reflect the quantity of the product in this shipment and may not be the total quantity listed on the Cubic Purchase Order.Description: Enter the name for the product supplied in this shipment. |
| Serial & Lot DataSerial No (s): Enter the serial number(s) for the product supplied in this shipment as applicable.Lot No (s): Enter the Lot Date/Lot Number/Batch Number as applicable.Shelf Exp.: If product has a limited shelf life, enter expiration date and indicate this date as either Date of Shipment (DOS) or Date of Manufacture (DOM). |
| Sampling DataSampling Inspection: Indicate if sampling inspection was used for inspection of the product supplied in this shipment by placing an X in the appropriate box.Sampling Plan: Enter the sampling plan, if applicable, used for inspection of the product supplied in this shipment.AQL: Enter the Acceptable Quality Level, if applicable, used for inspection of the product supplied in this shipment. |
| Specification DataReference Specification: Enter the specifications that the product supplied in this shipment is certified to meet as required by Cubic purchasing agreements (e. g. Customer specifications, Cubic specifications and drawings, Purchase Order requirements).Country of Origin: Indicate the country of origin of the product supplied in this shipment by placing an X in the appropriate box. For products with an origin outside the U. S., enter the name of the country of origin. |
| Supplier DataCompany Name: Enter the name of your facility.Address: Enter the street address of your facility.City: Enter the name of the city where your facility is located.State: Enter the abbreviation of the state where your facility is located.Zip: Enter the Zip Code for your facility.Name & Title of Company Quality Representative: Printer or type the name and title of the individual designated to sign as the quality representative for your facility.Signature of Company Quality Representative: The individual designated to sign as quality representative for your facility shall place signature here. Certificates of Conformance without a signature are not acceptable at Cubic.Date: Enter the date that the Certificate of Conformance is signed. |
| Cubic Quality Clause C-4A certificate of conformance, Cubic Form F-007 or equivalent, is required with each shipment. The certificate shall include: Cubic purchase order and line item number, part number, and applicable specifications. The certificate must have the signature of a quality representative, the title of the signing individual, and the date of signature. |