

DISTRIBUTOR

| DISTRIBUTOR NAME | | _DATE |
|------------------|-------------|----------|
| EMAIL: | PHONE: | FAX: |
| ADDRESS: | CITY/STATE: | ZIPCODE: |

The attached questionnaire is to be completed and forwarded together with any additional information to:

KLUNE INDUSTRIES INCORPORATED ATTN: PROCUREMENT QUALITY 1800 NORTH 300 WEST SPANISH FORK, UTAH 84660

The questionnaire is based on Military, NASA, and Klune Quality System requirements. Approval status shall be based upon an analysis of the completed questionnaire and, in some cases, an on site survey.

Quality system questions, if any, may be discussed by the supplier and Klune Industries Inc. (KII) after the returned questionnaire is reviewed by KII Quality Assurance.

Prior to any contemplated on site survey, a mutually convenient schedule for the survey will be established.

Your cooperation and assistance will be greatly appreciated.

IF YOU ARE NADCAP / AS9100 / ISO9001 APPROVED, PLEASE CHECK THIS BOX AND SUBMIT THIS PAGE *WITH A COPY OF YOUR CERTIFICATE*. DO NOT COMPLETE THE BALANCE OF THE SURVEY.

FOR KLUNE INDUSTRIES INCORPORATED USE ONLY

REVIEW OF PRODUCT ALERTS - RESULTS:

AUDIT APPROVAL BY:_____

APPROVAL PERIODS - FROM TO VENDOR CODE

REMARKS:_____

DISTRIBUTOR QUALITY SYSTEM QUESTIONNAIRE

| COMPANY NAME | | | |
|-----------------------------|---|-----------|--|
| QUESTIONNAIRE COMPLETED BY: | | | |
| NAME | TITLE | SIGNATURE | |
| | | | |
| PERSONNEL CONT. | PERSONNEL CONTACTED: (To be completed only upon KII on-site survey) | | |
| NAME | | TITLE | |
| NAME | | TITLE | |
| | | | |
| | | | |

SECTION A

IDENTIFY BELOW TYPES/CATEGORIES OF PRODUCTS DISTRIBUTED:

1.0 ELECTRONIC COMPONENTS/PARTS.

2.0 HARDWARE AND MISCELLANEOUS.

| 3.0 | RAW MATERIALS | SHEETS | BARS | RODS |
|-----|--|---------|------|------|
| | A. STEEL AND THEIR ALLOYS | | | |
| | B. ALUMINUM AND THEIR ALLOYS | | | |
| | C. BRASS, COPPER AND ALLOYS THEREOF | | | |
| | D. OTHER FERROUS/NONFERROUS METALS. DEFINE: | | | |
| | | | | |
| | E. EXOTIC METALS. DEFINE: | | | |
| | | | | |
| | F. CHEMICALS (bulk) AND DERIVATIVES THEREOF. | DEFINE: | | |
| | | | | |

DISTRIBUTOR QUALITY SYSTEM QUESTIONNAIRE

All items marked as NO or NA (Not Applicable) must be briefly justified in that all items within this survey are pertinent in determining supplier approval status. (Use an attached sheet if needed).

SECTION B

| 1.0 | PROCUREMENT CONTROLS | YES | NO* | N/A* |
|-----|---|-----|----------|------|
| | a. Do you maintain an Approved and/or Qualified Manufacturer's List? | | | |
| | b. Are all MIL parts procured from a QPL Source? | | | |
| | c. Do you have available and do you use such a QPL? | | | |
| | d. Does you Purchased Order to the manufacturer define and stipulate applicable MIL Specifications and related requirements? | | | |
| 2.0 | MANUFACTURER CONTROLS | YES | NO* | N/A* |
| | a. If required by Purchase Order will you require your Manufact- urer's to submit inspection/test data of material purchased? | | | |
| | b. Do you require and maintain on file, all certifications of material if required by Purchase Order? | | | |
| | c. Do you have an implemented system for determining the adequacy and qualification of your manufacturers? | | | |
| | d. Do you have an effective Corrective Action System? | | | |
| | e. Do you take corrective action on buyer reported deficiencies whether in your organization or suppliers? | | | |
| 3.0 | RECEIVING CONTROL | YES | NO* | N/A* |
| | a. Do you maintain a Receiving Inspection activity? | | | |
| | b. Do you perform inspections of materials received from Manufacture's | | | |
| | c. Do you maintain records of these functions? | | | |
| | d. Is the received material identified and traceable back to the Manufacturer's inspection/test data required by Purchase Order? | | | |
| | e. Can you provide your customers with inspection/test data and documentation upon request? | | | |
| | f. Is defective material identified and segregated? | | | |
| 4.0 | STOCK ROOM CONTROL | YES | NO* | N/A* |
| | a. Do you practice and implement the concept of "first in - first out" principle of stock control for perishable materials/chemicals? | | | |
| | b. Can the quality status of material be identified ? | | <u> </u> | |
| | c. Have you provided for, and maintained adequate control of all material in your stock room? | | · | |

DISTRIBUTOR QUALITY SYSTEM QUESTIONNAIRE

All items marked as NO or N/A (not Applicable) must be briefly justified in that all items within this survey are pertinent in determining supplier approval status. (Use an attached sheet if needed).

| 4.0 | STOCK ROOM CONTROL cont. | YES | NO* | N/A* |
|------|--|-------------|----------|------------|
| | d. Does all material contain adequate identification and segregation ? | | | <u> </u> |
| | e. Do you have a method for removing obsolete and unacceptable supplies? | | | |
| | f. Do you maintain Shelf Life controls over material where applicable? | | | |
| 5.0 | SHIPMENT CONTROLS | YES | NO* | N/A* |
| | a. Can you provide the proper handling, identification, and packaging material shipped to your customers? | | | - <u> </u> |
| | b. Do you implement and maintain a packaging and shipping inspection activity? | | | |
| | c. Is there a documented procedure to ensure work is accomplished in a manner preventing foreign objects or material in deliverable items? | | | |
| | d. Does your documented procedure maintain material handling, parts protection, work area housekeeping, tool accountability, hardware accountability, parts and materials in a manner sufficient to preclude the ris | k of FOD ir | cidents? | |
| 6.0 | ADDITIONAL INFORMATION WHICH WOULD BE SIGNIFICANT | YES | NO* | N/A* |
| | a. Are written procedures available for use by all inspection personnel? | | | - <u> </u> |
| | b. Is the Quality Control System derived from a specification such as: | | | |
| | AS9100 Other(please specify) | | | |
| | ISO-9001 Rev | | | |
| 7.0 | NOTES AND COMMENTS: | | | |
| | | | | |
| SURV | EYOR SIGNATURE DAT | Έ | | |