

VENDOR NONCONFORMING MATERIAL DISPOSITION REQUEST & PROPOSED CORRECTIVE ACTION

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VENDOR:	VENDOR CODE:	DATE:
PART NAME:	PART #:	LOT/SERIAL/ROLL#:
QUANTITY:	PURCHASE ORDER:	
DWG/SPEC AFFECTED:		

NONCONFORMING CONDITION / CAUSE:**VENDOR PROPOSED DISPOSITION:****VENDOR QA MANAGER:****DATE:****AXILLON AEROSPACE (ROCKMART), LLC RECOMMENDATION AND DISPOSITION:**

QA:	PRODUCTION:	ENGINEERING:	BUYER:	GOV'T/CUST (if req):
DATE:	DATE:	DATE:	DATE:	DATE:

VENDOR CORRECTIVE ACTION AND EFFECTIVITY:

QA:	PRODUCTION:	ENGINEERING:	BUYER:	GOV'T/CUST (if req):
DATE:	DATE:	DATE:	DATE:	DATE: