# SUPPLIER EVALUATION SURVEY

COMPANY NAME: CONTACT:

PHONE NUMBER: FAX NUMBER:

E-MAIL ADDRESS:

*Manufacturer Distributor Secondary Processing / Rework*

1.) Is your quality management system certified to one of the ISO standards (ISO 9001, AS9100, ISO/TS 16949, ISO 13485, TL9000, etc)?

 YES NO

2.) If yes, what is your certificate #?

 *Please forward a copy of your certification*.

3.) If no, what are your plans toward achieving ISO Certification?

4.) Do you have a Quality Control Manual? YES NO

5.) Do you have a formal Quality Control System? YES NO

6.) Are all products / material inspected prior to delivery? YES NO

7.) What type of inspection do you perform?

8.) What are your procedures concerning rejection?

9.) Do you rate your suppliers? YES NO

10.) Would you permit an Audit of your premises

 by an Camtron Inc.Representative?YES NO

11.) What products / services can you provide?

12.) Please provide the name, address, phone number and contact of three references:

 A.)

 B.)

 C.)

13.) Do you supply goods that contain tantalum, tin, YES NO

tungsten or gold?

14.) If yes, please complete EICC/GeSi Template and return with survey.

IECC/GeSi Template can be downloaded at: <http://www.conflictfreesmelter.org/documents/EICCGeSiddtemplate.xlsx>

Name & Title of person completing this form:

Approved by evaluation of Supplier Survey YES NO

Approved by Supplier Site Visit YES NO

Approved by Trial Buy YES NO

Approved by: Date: