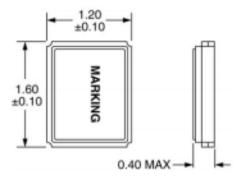


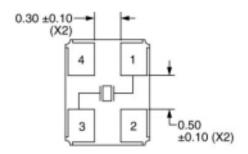
## **Engineering/Process Change Notice**

**ECN/PCN No.: 3887** 

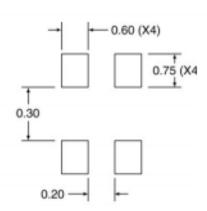
|   | Documentation only | Series                   |
|---|--------------------|--------------------------|
|   | ECN<br>EOL         | ☐ Part Number            |
| _ | plication:         | ☐ Safety<br>☑ Non-Safety |
|   |                    | Application:             |

IXA10 Rev. B - Pin 4: Cover/Ground





Note: Chamfer not shown.



| Pin Connections |              |  |  |
|-----------------|--------------|--|--|
| Pin 1           | Crystal      |  |  |
| Pin 2           | Cover/Ground |  |  |
| Pin 3           | Crystal      |  |  |
| Pin 4           | Cover/Ground |  |  |

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**ABRACON** 





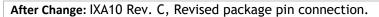


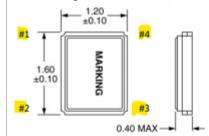


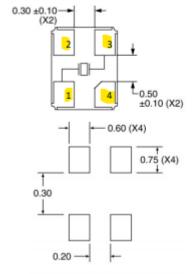




## **Engineering/Process Change Notice**







| Pin Connections |              |  |
|-----------------|--------------|--|
| Pin 1           | Crystal      |  |
| Pin 2           | Cover/Ground |  |
| Pin 3           | Crystal      |  |
| Pin 4           | No Connect   |  |

## Cause/Reason for Change:

Clarification and better identification of devise and pad fucntion

|                                     | Change Plan          |                     |  |  |
|-------------------------------------|----------------------|---------------------|--|--|
| <b>Effective Date:</b> 07/21/2021   | Additional Remarks:  | Additional Remarks: |  |  |
| Change Declaration:                 | '                    |                     |  |  |
| This change has no impact on device | function.            |                     |  |  |
| Issued Date:                        | Issued By:           | Issued Department:  |  |  |
| 07/21/2021                          | Stephanie Lopez      | Engineering         |  |  |
| Approval:                           | Approval:            | Approval:           |  |  |
| Thomas Culhane                      | Reuben Quintanilla   | Ying Huang          |  |  |
| Engineering Director                | Quality Director     | Purchasing Director |  |  |
|                                     | For Abracon FOL only |                     |  |  |

| For Abracon EOL only                   |                      |                                      |                      |
|--|----------------------|--------------------------------------|----------------------|
| Last Time Buy (if applicable): Alterna |                      | Alternate Part Number / Part Series: |                      |
| None                                   |                      |                                      | None                 |
| Additional Approval:                   | Additional Approval: |                                      | Additional Approval: |

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## **Engineering/Process Change Notice**

|                                    | Customer Appro                  | oval (If Applicable)  |                           |
|------------------------------------|---------------------------------|-----------------------|---------------------------|
| Qualification Status:              |                                 |                       |                           |
|                                    | $\square$ Approved              | ☐ Not accepted        |                           |
| Note: It is considered approved if | there is no feedback from the c | rustomer 1 month afte | er ECN/PCN is released.   |
| Customer Part Number:              |                                 | Customer Project:     |                           |
| Company Name:                      | Company Represent               | tative:               | Representative Signature: |
| Customer Remarks:                  |                                 |                       |                           |

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