

Engineering/Process Change Notice

ECN/PCN No.: 4617

| For Manufacturer | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------|---------------------------|-----------------------|
| Product Description: | Abracon Part Number | er / Part Series: | ☐ Documentation only | ⊠ Series |
| Full Size DIP Low Voltage 5.0V Crystal | ACO s | eries | ⊠ ECN | \square Part Number |
| clock oscillator | | | ☐ EOL | |
| Affected Revision: | New Revision: | | Application: | ☐ Safety |
| I | J | | | ⋈ Non-Safety |
| Prior to Change: Internal Assembly: Plating on Resonator type | | | | |
| After Change: | | | | |
| Internal Assembly: Ceramic SMD mount type | | | | |
| Cause/Reason for Change: | | | | |
| Change of internal assembly type. No form, fit, or function change. Change of internal assembly type. No form, fit, or function change. No affect on external mechanical dimensions or electrical specifications. | | | | |
| Change Plan | | | | |
| Effective Date: | Additional Remarks: | | | |
| 3/24/2023 | | | | |
| Change Declaration: | | | | |
| | | | | |
| Issued Date: | Issued By: | | Issued Department: | |
| 3/24/2023 | Arturo Longoria | | Engineering | |
| Approval: | Approval: | | Approval: | |
| Thomas Culhane | Reuben Quintanilla | | Ying Huang | |
| Engineering Director | Quality Director Purchasing Director | | | |
| For Abracon EOL only | | | | |
| Last Time Buy (if applicable): | Alternate Part Number / Part Series: | | | |
| N/A | | | N/A | |
| Additional Approval: | Additional Approval: Ad | | Additional Approval: | |
| Customer Approval (If Applies ble) | | | | |
| Customer Approval (If Applicable) | | | | |
| Qualification Status: ☐ Approved ☐ Not accepted | | | | |
| Note: It is considered approved if there is no feedback from the customer 1 month after ECN/PCN is released. | | | | |
| Customer Part Number: | | Customer Project: | | |
| | | | | |
| Company Name: | Company Representative: | | Representative Signature: | |
| | | | | |
| Customer Remarks: | | | | |
| | | | | |
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Form #7020 | Rev. G | Effective: 02/22/2021 |









