

**E | S | C**

**Electronic Source Company**

CUSTOMER ORDER FORM

**1)** Please include a hard copy of this form with each kit.

Customer:

Job Contact:

Shipping Address:

Phone #: [ ]

Fax #: [ ]

E-Mail: [ ]

**2)**

Assembly #:

P.O. Number: [ ]

P.O. Date: [ ]

Is the kit complete:  Yes

No – If No, should the job be run short the missing parts?  Yes (Specify in Section 3)

No

Date Kit complete at ESC: [ ]

Expected Shipping: 1) Date:

Qty:

2) Date:

Qty:

Service Required:  Assembly

Other:

Is this a:

Repeat Job; if so, please verify Revision: [ ]  
(If Repeat Job, skip below and go to section 3)

Revision Change (Please fill Revision Information below)

New Job (Please fill Revision Information below)

**Revision Information:** Assembly Rev:

BOM Rev:

Blue Print Rev:

ECN: [ ]

Has the following Data been provided?

Gerber – if PCB is panelized, is Gerber panelized?  Yes

No

Placement/Centroid Data in Excel or ASCII format

BOM in Excel or ASCII format

**3)** Special Manufacturing Instructions:

[ ]