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| |  |  |  | | --- | --- | --- | | 1. Company/Supplier Name |  |  | | 1. Supplier Representative Name |  |  | | 1. Purchase Order No. |  |  | | 1. Position No./Line Item |  |  | | 1. Quantity |  |  | | 1. Supplier Return No. (Optional) |  |  | | 1. Serial Number |  |  | | 1. Supplier Part No. |  |  | | 1. Ingalls (DA0/DSL) Part No. |  |  | | | |
|  | | |
| 1. Detailed Problem/Root Cause (Add Attachment A: When Additional Comments/Photos Apply): | | |
|  |  |  |
|  | | |
| 1. Detailed Solution/Fix (Add Attachment B: When Additional Comments/Photos Apply): | | |
|  |  |  |
| 1. Optional: Recurring Problem Mitigation/Supplier Preventative/Protection Recommendations   (Add Attachment C: When Additional Comments/Photos Apply): | | |
| 1. Equipment was satisfactorily retested.  Y  N   Comments: | | |
|  | | |
| This material is non-repairable (Pleases check the box if applicable). | | |
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|  | | |
| Supplier Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date | |