

Supplier Change Request Form

(Refer to Supplier Quality Requirements Manual)

(Note:	This form	does not re	place Critica	l Process	Change Re	quest Form	K927)
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Supplier Name:	Supplier Number:		er:	Date of Request:							
Address:	City:		State:		:						
Phone:	E-Mail:										
Kaman Buyer Listed on P.O.:		Contact:									
		Type of Change Request									
Name Change: Address Change:		Process Change:		Mgt. /Contact Change:		Qual. Sys. Change:					
Specific Change Information											
		Now:									
Additional comments, supporting information or, attachments:											
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Mail the completed portion above to: khepurchasing@kaman.com

Below for Kaman Use Only

- Refer to Form QF 4.1.165 instructions for applicable forms/certifications required from supplier.
- When applicable forms completed/received attach to form QF 4.1.165 Supplier Maintenance Form.
- For Special Process additions; NADCAP Certification for each process to be attached.
- Attach this completed form to location on form QF 4.1.165 and complete process.