

August 6th, 2018

Request for Deviation

Customer: DigiKey Anaren Order#
Customer P/N: Anaren Waiver # 00023
Anaren P/N: DC0710J5010AHF/66520-G001 Qty Affected: 8,000

Request for Performance Deviation(s):

Anaren would like to request a deviation to DC0710J5010AHF that do not meet directivity specifications for all three bands. The table below outlines the current specification and required deviation to those specifications.

Current Data Sheet Specifications:

Frequency (MHz)	Mean Coupling (dB)			Insertion loss (dB)		Return Loss (dB)		Directivity (dB)		Frequency Sensitivity (dB)	
	Min	Typ.	Max	Typ.	Max	Typ.	Min	Typ.	Min	Typ.	Max
700 - 1000	11.7	10.9	10.2	0.21	0.30	17.5	14.2	20.1	17.3	0.37	0.54
869-894	11.3	10.7	10.2	0.20	0.29	19.4	15.9	22.2	18.4	0.03	0.09
925-960	11.8	10.9	10.2	0.21	0.30	19.4	16.7	23.1	19.1	0.09	0.12

Waiver Specifications:

Frequency (MHz)	Mean Coupling (dB)			Insertion loss (dB)		Return Loss (dB)		Directivity (dB)		Frequency Sensitivity (dB)	
	Min	Typ.	Max	Typ.	Max	Typ.	Min	Typ.	Min	Typ.	Max
700 – 1000	11.7	10.9	10.2	0.21	0.30	17.5	14.2	20.1	14.0	0.38	0.54
869-894	11.3	10.7	10.2	0.20	0.29	19.4	15.9	22.2	16.0	0.05	0.09
925-960	11.8	10.9	10.2	0.21	0.30	19.4	16.7	23.1	15.0	0.09	0.12



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Short Term Action:

Once this deviation request is approved, it will take approximately 5 business days to complete the final processing of the material for shipment.

Long Term Action:

Parts shipped to the customer after these orders will meet the datasheet specifications.

Additional Actions:

If this deviation is acceptable to you, please sign below and email it back to the sales team representative that you are working with. Due to Anaren's commitment to maintain our quality levels, your consent is required for us to release these units.

If you have any questions or need further information, please call me at 1-800-544-2414 or send e-mail to casey.hennigan@anaren.com.

Sincerely,
Casey Hennigan
Project Engineer (Wireless Components)
Anaren, a TTM Technologies Company
<http://www.anaren.com>

We accept this waiver/deviation _____
(Representative Signature) (date)

(Representative Signature) (date)