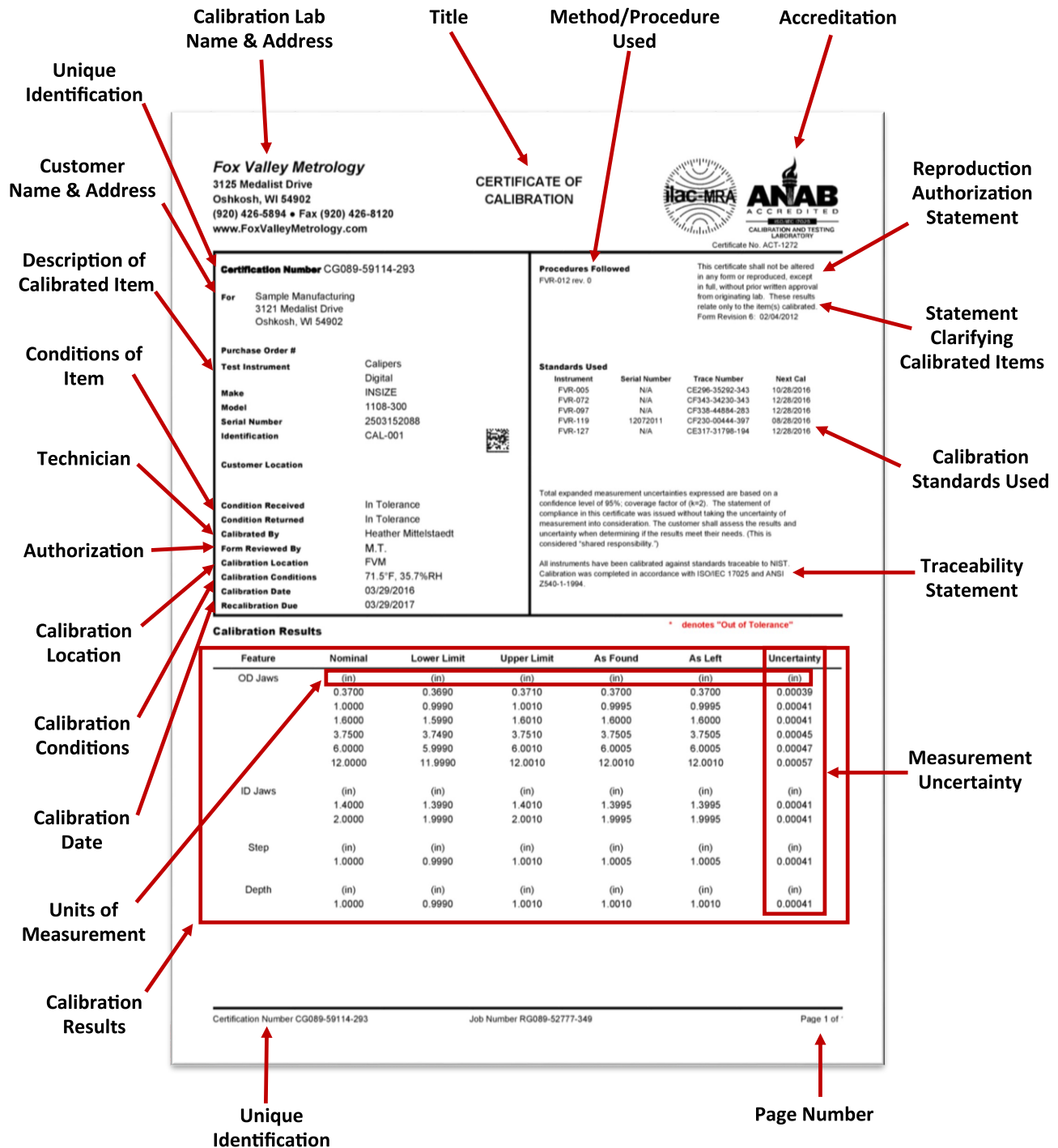


# CALIBRATION CERTIFICATE REQUIREMENTS



Calibration Lab Name & Address

Title

Method/Procedure Used

Accreditation

Unique Identification

Customer Name & Address

Description of Calibrated Item

Conditions of Item

Technician

Authorization

Calibration Location

Calibration Conditions

Calibration Date

Units of Measurement

Calibration Results

Reproduction Authorization Statement

Statement Clarifying Calibrated Items

Calibration Standards Used

Traceability Statement

Measurement Uncertainty

Unique Identification

Page Number

**Fox Valley Metrology**  
3125 Medalist Drive  
Oshkosh, WI 54902  
(920) 426-5894 • Fax (920) 426-8120  
www.FoxValleyMetrology.com

CERTIFICATE OF CALIBRATION



Certificate No. ACT-1272

**Certification Number** CG089-59114-293

**For** Sample Manufacturing  
3121 Medalist Drive  
Oshkosh, WI 54902

**Purchase Order #**

**Test Instrument** Calipers  
**Make** Digital  
**Model** 1108-300  
**Serial Number** 2503152088  
**Identification** CAL-001

**Customer Location**

**Condition Received** In Tolerance  
**Condition Returned** In Tolerance  
**Calibrated By** Heather Mittelstaedt  
**Form Reviewed By** M.T.  
**Calibration Location** FVM  
**Calibration Conditions** 71.5°F, 35.7%RH  
**Calibration Date** 03/29/2016  
**Recalibration Due** 03/29/2017

**Procedures Followed**  
FVR-012 rev. 0

**Standards Used**

Instrument	Serial Number	Trace Number	Next Cal
FVR-005	N/A	CE296-35292-343	10/28/2016
FVR-072	N/A	CF343-34230-343	12/28/2016
FVR-097	N/A	CF338-44884-283	12/28/2016
FVR-119	12072011	CF230-00444-397	08/28/2016
FVR-127	N/A	CE317-31798-194	12/28/2016

This certificate shall not be altered in any form or reproduced, except in full, without prior written approval from originating lab. These results relate only to the item(s) calibrated. Form Revision 0: 02/04/2012

Total expanded measurement uncertainties expressed are based on a confidence level of 95% coverage factor of (k=2). The statement of compliance in this certificate was issued without taking the uncertainty of measurement into consideration. The customer shall assess the results and uncertainty when determining if the results meet their needs. (This is considered "shared responsibility.")

All instruments have been calibrated against standards traceable to NIST. Calibration was completed in accordance with ISO/IEC 17025 and ANSI Z540-1-1994.

**Calibration Results**

\* denotes "Out of Tolerance"

Feature	Nominal	Lower Limit	Upper Limit	As Found	As Left	Uncertainty
OD Jaws	(in)	(in)	(in)	(in)	(in)	(in)
	0.3700	0.3690	0.3710	0.3700	0.3700	0.00039
	1.0000	0.9990	1.0010	0.9995	0.9995	0.00041
	1.6000	1.5990	1.6010	1.6000	1.6000	0.00041
	3.7500	3.7490	3.7510	3.7505	3.7505	0.00045
	6.0000	5.9990	6.0010	6.0005	6.0005	0.00047
	12.0000	11.9990	12.0010	12.0010	12.0010	0.00057
ID Jaws	(in)	(in)	(in)	(in)	(in)	(in)
	1.4000	1.3990	1.4010	1.3995	1.3995	0.00041
	2.0000	1.9990	2.0010	1.9995	1.9995	0.00041
Step	(in)	(in)	(in)	(in)	(in)	(in)
	1.0000	0.9990	1.0010	1.0005	1.0005	0.00041
Depth	(in)	(in)	(in)	(in)	(in)	(in)
	1.0000	0.9990	1.0010	1.0010	1.0010	0.00041

Certification Number CG089-59114-293

Job Number RG089-52777-349

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