*This form must be filled out completely with no blanks.   
Email the completed form to Data Management at* [ems\_cm@ga.com](mailto:ems_cm@ga.com)*.*

# Requestor Information

|  |  |
| --- | --- |
| Supplier/Contractor Name: | Insert name here |
| Date of Request: | MM/DD/YYYY |
| Quality Clause # for Request: | Insert only one Quality Clause number here (e.g., 275) |

# Restrictions

Each request for document reuse shall be specific to a quality clause (e.g., 275 or 280). Documents for multiple quality clause requirements shall be submitted separately.

All document reuse requests shall be approved by GA-EMS prior to implementation.

# Document Reuse Options

Option 1: Supplier documents that were previously approved by GA-EMS for a specific part/hardware at a specific revision may be reused for the manufacturing of an identical part/hardware as long as the new part/hardware has the same part number and revision as the original part/hardware document.

Option 2: Supplier documents that were previously approved by GA-EMS may be applicable for the manufacturing of a new part/hardware. The supplier document must meet or exceed the new part/hardware requirements of the purchase order (PO).

# Supplier Document Identification

## Option 1 Request (as applicable to the PO)

| **Previous PO Number** | **Current PO Number** | **Previous Program** | **Current Program** | **Supplier Document Type / Description** | **Supplier Document Number** | **Supplier Document Revision** | **Part Number** | **Part Revision** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
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\*Add rows as needed

## Option 2 Request (as applicable to the PO)

| **Previous PO Number** | **Current PO Number** | **Supplier Document Number** | **Supplier Document Revision** | **Previous Part Number** | **Part Revision** | **New Part Number** | **Part Revision** |
| --- | --- | --- | --- | --- | --- | --- | --- |
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\*Add rows as needed