**SIKORSKY AUDIT REPORT**

*****This document contains no technical data subject to the ITAR or the EAR.*****

**SUPPLIER:** Element Cleveland  
**ADDRESS:** 5405 East Schauf Road  
Cleveland, OH 44131

**CONTACT:** Jeffry Smith  
**TITLE:** Manager, Quality

**FLIGHT SAFETY:** NO  
**TEL.:** 216-524-1450  
**FAX:** 216-524-1459  
**E:MAIL:** jeffry.smith@element.com

**SIKORSKY REP.:** Dennis Jackson  
**AUDIT DATE:** 05/05/16

### SPECIAL PROCESS SURVEYS/AUDITS:

<table>
<thead>
<tr>
<th>CODE</th>
<th>SPECIFICATION</th>
<th>A</th>
<th>C</th>
<th>W</th>
<th>REMARKS/LIMITATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lab 1</td>
<td>ASTM-E-8</td>
<td></td>
<td></td>
<td>X</td>
<td>Note: 7, Including Sub Size</td>
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<tr>
<td>Lab 3</td>
<td>ASTM-E-548, E-882, E-743, E-851</td>
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<tr>
<td>Lab 5</td>
<td>ASTM-E-3</td>
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<td>Note: 7, Including Titanium</td>
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<tr>
<td>Lab 7</td>
<td>ASTM-E-10, ASTM-E-18, ASTM-E-384</td>
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<td>Note: 7</td>
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**DISPOSITION CODES:**  
A = APPROVED, C = CONDITIONAL APPROVAL, W = WITHHELD

**REMARK CODES:**

1 = INTERNAL USE ONLY (CAPTIVE)  
2 = APPROVAL OF FACILITIES ONLY - A WRITTEN PROCEDURE FOR EACH PART NUMBER MUST BE APPROVED.  
3 = LIMITED TO PRECIPITATION AGING ONLY.  
4A = LACK OF ACTIVITY  
4B = PROCESS DISCONTINUED  
4C = QUALITY PROBLEM  
5A = EXCLUDING 7075T73  
5B = INCLUDING 7075T73  
6 = NOT AUDITED AT THIS TIME. CONTINUED APPROVAL BASED ON AUDIT OF:  
7 = NADCAP APPROVED (NON CAPTIVE)  
8 = INTERPRETATION OF INDICATIONS IN ACCORDANCE WITH SS8802, SS8805, OR SS8806  
9 =

**APPROVED UNITS (i.e. FURNACES / TANKS):** N/A

**NDI CERTIFIED LEVEL III PERSONNEL:** N/A

### PRODUCT ORIENTED (QUALITY SYSTEM) ASSESSMENTS:

**TYPE:**

- (CHECK BELOW AS APPLICABLE)
  - INITIAL ASQR-01 GROUP 1 (FLIGHT SAFETY)
  - INITIAL ASQR-01 GROUP 1 (NON-FLIGHT SAFETY)
  - INITIAL ASQR-01 GROUP 2
  - GROUP 1 PRODUCT/PROCESS CONFORMITY AUDIT
  - PRODUCT/PROCESS CONFORMITY AUDIT INCLUDING F/S
  - FOCUSED FLIGHT SAFETY AUDIT (BLITZ)
  - GROUP 2 PRODUCT/PROCESS CONFORMITY AUDIT

**DISPOSITION CODE:**

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**S/A MANAGEMENT REVIEW:**

[Signature]

**DATE:** 5/24/16

SA 5195-1 Revision 11/28/12  
Verify current revision of form