


| | | |
|--------------------------------------|--|---|
| DOCUMENT NUMBER: SCM100111 | TITLE: First Article Inspection Form |  |
| REVISION: J | DOCUMENT CLASSIFICATION: | |
| DCO# DCO005545 | 04-Form, Template or Other | |

1 PURPOSE

Suppliers to fill out and submit the attached form with all required documentation for every FAI lot.

2 REFERENCE DOCUMENTS, FORMS

| Internal Document References - Reference the related procedures and work instruction documents that explain how to use this form (if applicable). | |
|--|--------------------|
| Document Number | Document/Form Name |
| N/A | N/A |

3 DETAILS


3.1 Supplier must check each box on the attached form and provide all required documentation.

4 RECORD RETENTION

| The following records are generated from this process. | | |
|---|--------------|----------------|
| TYPE OF RECORD | ABBREVIATION | WHERE RETAINED |
| FAI Form | FAI | Agile |
| For Control and Retention of Quality Records, see QMS101517 | | |

Confidential: The information is confidential and is to be used only in connection with matters authorized by Brooks and no part of it is to be disclosed to others without prior written permission from Brooks.

| | | |
|--|---|---------------------------|
| Template Number: QMS100317 | Template Name: 02-QMS Procedures Template | Template Rev: F |
| Date Printed: Wednesday, April 2, 2025 | This is uncontrolled when printed | PAGE 1 OF 4 |

| | | |
|--------------------------------------|--|---|
| DOCUMENT NUMBER: SCM100111 | TITLE: First Article Inspection Form |  |
| REVISION: J | DOCUMENT CLASSIFICATION: | |
| DCO# DCO005545 | 04-Form, Template or Other | |

| Supplier Information | | | |
|---|--|--|------------------------------|
| Supplier Name: | Supplier Location: | Supplier Phone #: | Supplier email: |
| Wuxi Shaoneng | Wuxi China | +86 510 85580205 | bian.xiang@shaofanggroup.com |
| Part Number Information | | Reason for Submission | |
| Part Number: | 642832 | <input checked="" type="checkbox"/> New Part / Part Number Change <input type="checkbox"/> Engineering Rev. Change <input type="checkbox"/> Change in Part Processing <input type="checkbox"/> OEM Part rev. Changes <input type="checkbox"/> Sub-tier Supplier Change <input type="checkbox"/> Change in Manufacturing Location <input type="checkbox"/> Other (please specify) <input type="checkbox"/> Part is manufactured from a Solid Model and PSD | |
| Part Revision: | A | | |
| Part Description: | COVER, BANDS, FOREARM, UPPER ARM, ITRX | | |
| PO Number: | BAI9015504 | | |
| <p>Unless otherwise stated, the FAI documents, listed below, are required for all FAI submissions.</p> <p>Please mark "X" in each box accordingly. Any questions? Please ask your Purchasing or Quality Representative at Brooks Automation</p> | | | |

Confidential: The information is confidential and is to be used only in connection with matters authorized by Brooks and no part of it is to be disclosed to others without prior written permission from Brooks.

Template Number: QMS100317


Template Name: 02-QMS Procedures Template

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PAGE **2** OF **4**

| | | |
|--------------------------------------|--|---|
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| DCO# DCO005545 | 04-Form, Template or Other | |

| | |
|--|--|
| <p style="text-align: center;">Compulsory Quality Requirements for all First Articles</p> <p><input checked="" type="checkbox"/> First Article Inspection Form (This form completed)</p> <p><input checked="" type="checkbox"/> Supplier's Certificate of Conformance including one for hardware on Company Letterhead</p> <p><input checked="" type="checkbox"/> "Bubbled" Dimensional Drawing and/or BOM. Bubble sequence starting at note 1 and numbered in clockwise direction for each feature or view.</p> <p><input type="checkbox"/> FAI(s) for "Make to Print" parts listed on Brooks' BOM</p> <p><input checked="" type="checkbox"/> Final Inspection Data Sheet Report including measurement device type, ID#, and calibration due dates</p> <p><input checked="" type="checkbox"/> Manufacturer's Affidavit "Country of Origin" Brooks' form #QMS100107</p> <p><input checked="" type="checkbox"/> Pictures of one part for FAI package with copy retained at supplier site. Color pictures required of top, bottom, all sides, part marking, silk screening, sealing surfaces (if applicable), part in labeled closed/sealed packaging per applicable SCM100022 section, and packed in box with protective packaging. Pictures taken must be in proper lighting and must be expandable. Mandatory</p> <p><input type="checkbox"/> Approved SIAR(s), if applicable</p> <p><input type="checkbox"/> Test Records and Data, if applicable</p> <p>Special Certificates of Conformance, if applicable</p> <p><input checked="" type="checkbox"/> Certificate of Conformance for Raw Materials</p> <p><input type="checkbox"/> Certificate of Conformance for Special Processes Examples: Plating, Painting, Coating, Welding, etc.</p> <p>For adding/changing Electrical Device or Assembly:</p> <p><input type="checkbox"/> Add Data sheet</p> <p><input type="checkbox"/> Test Report comparison of old and new</p> <p>For adding/changing Epoxy:</p> <p><input type="checkbox"/> Data sheet</p> <p><input type="checkbox"/> Temperature comparison of old and new</p> <p><input type="checkbox"/> Life expectancy comparison of old and new</p> | <p>Is this a CRITICAL PART? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> (Mandatory Response)</p> <p>(Please refer to Drawings and /or Purchase Order)</p> <p>Note: All "CRITICAL PARTs" will require the following documents!</p> <p><input type="checkbox"/> POR (Process of Record) Brooks' form #SCM100112</p> <p><input type="checkbox"/> PCP (Process Control Plan) Brooks' form #SCM100113</p> <p><input type="checkbox"/> Critical Part Data for Key Features on Drawing, if applicable Statistical data such as normality, Cp, and CPK. Required</p> <p><input type="checkbox"/> Gage R&R</p> <p><input type="checkbox"/> Process Failure Mode Effects Analysis</p> <p>POR/PCP is currently:</p> <p><input type="checkbox"/> Final</p> <p><input type="checkbox"/> Still Under Development/Preliminary</p> <p>Note: It is acceptable to submit an Under Development/Preliminary POR/PCP.</p> <p><input type="checkbox"/> This FAI submittal was produced on the production line.</p> <p>Brooks' Supplier Quality conducts periodic reviews of the POR/PCP.</p> |
|--|--|

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| | | |
|--|---|---------------------------|
| Template Number: QMS100317 | Template Name: 02-QMS Procedures Template | Template Rev: F |
| Date Printed: Wednesday, April 2, 2025 | This is uncontrolled when printed | PAGE 3 OF 4 |

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| DOCUMENT NUMBER: SCM100111 | TITLE: First Article Inspection Form |  |
| REVISION: J | DOCUMENT CLASSIFICATION: | |
| DCO# DCO005545 | 04-Form, Template or Other | |

Certificate of Conformance.

"We have reviewed the requirements of this First Article and certify that the sample submitted meets all Industry, Regulatory, Brooks' Workmanship Standards and specified requirements as noted by Brooks' Drawings and Purchase Order" and was produced on the production line.

| | | | |
|-----------------------|-----------------|---------------|----------|
| EXPLANATION/COMMENTS: | N/A | | |
| Print Name | Title: | Signature: | Date: |
| Yu Wei | Quality Manager | <i>yu wei</i> | 2025/4/2 |

Supplier Instructions:

MANDATORY: E-mail this form, SCM 1000111, and other applicable documents to the appropriate e-mail address.

E-mail in .pdf format to FirstArticle@Brooks.com

Any questions? Please ask your Purchasing or Quality Representative at Brooks Automation.

FOR BROOKS USE ONLY

| | | |
|------------|--|--|
| Results: | <input type="checkbox"/> Accepted | <input type="checkbox"/> Rejected (note NMR case# if rejected): |
| Comments: | | |
| Inspector: | Date: | |

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|--|---|---------------------------|
| Template Number: QMS100317 | Template Name: 02-QMS Procedures Template | Template Rev: F |
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CERTIFICATE OF CONFORMANCE

Customer : Brooks
Purchase Order Number : BAI9015504
Date : 4/2/2025
Part Number : 642832Rev. A
Part Description : COVER,BANDS,FOREARM,UPPER ARM, ITRX
Quantity : 5
Finishing : NONE
Quality Inspection/ Test Data (Separate Files Attached)

PLEASE SEE ATTACHED FILES

This is to certify that the quantity of part(s) or material(s) described above is manufactured in accordance with applicable specifications and in compliance with all specified requirements.

It is certified that quality inspection and / or tests have been performed as required to assure product conformance with applicable specifications

yu wei

(Signature)

Title: Quality Manager

Print Name: Yu Wei

WUXI SHAONENG SHEET METAL MANUFACTURING CO., LTD.

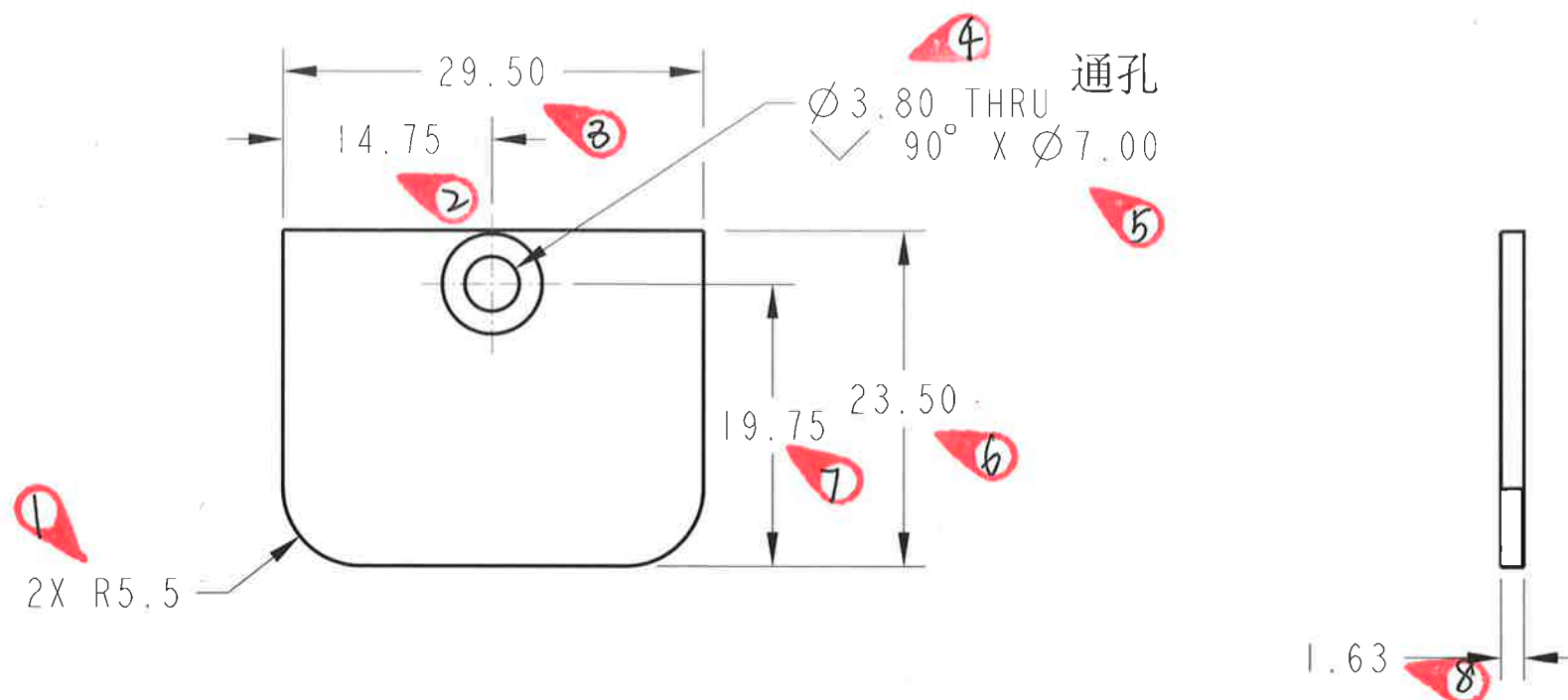
NO. 2 WEST JINGUI RD, HUDAI TOWN, BINHU DIST, WUXI, JIANGSU 214161, CHINA

Tel: 86 510-85580205

Fax: 86 510-83217510

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| | | | |
|-----|------------------|-----------|-------|
| REV | DATE | BY | APP |
| A | REL PER ECI60-28 | 03-Dec-24 | PJ CB |



- 1 铝合金 5052 符合 ASTM B209/B209M, 硬度H32
2 表面处理: 无后续二次喷涂/化学处理
4 按照SCM100022第25章
A 参考文档: SCM100022_K Revision 表面处理 SECTION IB
B 参考文档: SCM100022_K Revision 最终清洁 译文
C 参考文档: SCM100022_K Revision 29.9 包装译文
6 方法7: 独立包装包装袋上永久墨印标签

NOTES:

1. MATERIAL: ALUMINUM ALLOY, 5052 IN ACCORDANCE WITH ASTM B209/B209M, TEMPER H32.
2. FINISH: NO POST SECONDARY PAINT/CHEMICAL TREATMENTS.
3. PART SHALL BE IN COMPLIANCE WITH BAI FABRICATED PART SUBSTANCE COMPLIANCE REQUIREMENTS DOCUMENT 147301.
4. REQUIREMENTS TO BE PER BAI WORKMANSHIP STANDARD SCM100022, CHAPTER 25.
A. SECTION 1B, NON UNIFORM RANDOM MATTE FINISH.
B. SECTION 5, FINAL CLEANING PROCESS.
C. SECTION 7, PACKAGE PER WORKMANSHIP STANDARD CHAPTER 29.9.
5. INSPECT PER BAI WORKMANSHIP STANDARD SCM100022, CHAPTER 26, CLASS 11, CATEGORY A.
6. MARK PART PER BAI WORKMANSHIP STANDARD SCM100022 CHAPTER 28.10 METHOD 7.

尺寸单位是mm
尺寸适用于加工后

另有规定除外

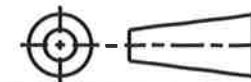
UNLESS OTHERWISE SPECIFIED:
DIMENSIONS ARE IN mm
DIMENSIONS APPLY AFTER PROCESSING
TOLERANCES 公差

X = ± 3
X.X = ± 0.3
X.XX = ± 0.13
角 ANGLES = ± .5° 表面
SURFACE FINISH: 1.6 µm R 处理

MANUFACTURE TO BAI DOCUMENT
SCM100022 WORKMANSHIP STD 180
INTERPRET DIM AND TOL PER
ASME Y14.5 - 2018

DRAWN BY: P. JOSHI
CHECKED BY: C. BUSSIERE
MATERIAL: SEE NOTES
TREATMENT: SEE NOTES
DATE: 03-Dec-24
DATE: 04-Dec-24

THIRD ANGLE PROJECTION



Brooks

DWG TITLE
COVER, BANDS, FOREARM, UPPER ARM, ITRX

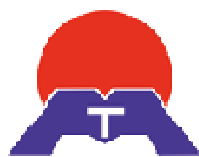
SIZE B DWG NO. 642832 REV A
SCALE: 2.000 SHT OF

尺寸检测报告

Dimension Inspection Report

A/1

| | | | | | | | | | | | |
|------------------|--|-------------------|-------|--------------------------|------------------------|-------|----------------------------|-------|-------------------------|--|----------------|
| 产品图号 P/N | 642832 | | | 图纸版本号 Version | A | | 产品订单号 PO # | | BAI9015504 | | |
| 产品名称 Desc. | COVER,BANDS,FOREARM,UPPER ARM, ITRX | | | 材料/规范 Mat./Criteria | 5052 | | 检测人员/日期 Inspector /Date | | Wang Yang Yang 2025/4/2 | | |
| 报告类属 Category | ■样件 □小批量试制 □量产 Sample Pre-lanch Mass | | | 重量/KG Weight | / | | 质量工程师/日期 QE /Date | | Xue Yan Fei 2025/4/2 | | |
| 序号 NO. | 检测尺寸及公差 Dimision&Tolerance | | | 检验方法 Methodology | 实 测 值 Actual Dimension | | | | | | 说明 Comments |
| | | | | | 1# | 2# | 3# | 4# | 5# | | |
| 1 | R5.5 | +0.30 | -0.30 | 投影仪 Profile projector | OK | OK | OK | OK | OK | | OK |
| 2 | 14.75 | +0.13 | -0.13 | 投影仪 Profile projector | 14.74 | 14.75 | 14.75 | 14.76 | 14.74 | | OK |
| 3 | 29.50 | +0.13 | -0.13 | 投影仪 Profile projector | 29.48 | 29.47 | 29.47 | 29.48 | 29.49 | | OK |
| 4 | φ3.80 | +0.13 | -0.13 | 投影仪 Profile projector | 3.79 | 3.81 | 3.82 | 3.84 | 3.83 | | OK |
| 5 | φ7.00 | +0.13 | -0.13 | 卡尺 Caliper | 6.94 | 6.92 | 6.98 | 6.98 | 9.96 | | OK |
| 6 | 23.50 | +0.13 | -0.13 | 投影仪 Profile projector | 23.49 | 23.48 | 23.47 | 23.49 | 23.48 | | OK |
| 7 | 19.75 | +0.13 | -0.13 | 投影仪 Profile projector | 19.76 | 19.75 | 19.74 | 19.78 | 19.76 | | OK |
| 8 | 1.63 | +0.13 | -0.13 | 卡尺 Caliper | 1.58 | 1.57 | 1.59 | 1.58 | 1.57 | | OK |
| 9 | MATERIAL:ALUMINUMALLOY,5052 IN ACCORDANCE WITH ASTM B209/B209M,TEMPER H32 | | | Material Certification | OK | OK | OK | OK | OK | | OK |
| 10 | FINISH:NO POST SECONDARY PAINT/CHEMICAL TREATMENTS. | | | Acknowledged | OK | OK | OK | OK | OK | | OK |
| 11 | PART SHALL BE IN COMPLIANCE WITH BAI FABRICATED PART SUBSTANCE COMPLIANCE REQUIREMENTS DOCUMENT 147301. | | | Acknowledged | OK | OK | OK | OK | OK | | OK |
| 12 | .REQUIREMENTS TO BE PER BAI SPECIFICATION NO SCMI00022 CHAPTER 25. A SECTION IB,NON UNIFORM RANDOM MATTE FINISH B.SECTION5,FINAL CLEANING PROCESS C.SECTION 7.PACKAGE PER WORKMANSHIP STANDARD CHAPTER 28.9 | | | Acknowledged | OK | OK | OK | OK | OK | | OK |
| 13 | INSPECT PER BAI WORKMANSHIP STANDARD SCMI00022,CHAPTER 26,CLASS II.CATEGORY A. | | | Acknowledged | OK | OK | OK | OK | OK | | OK |
| 14 | MARK PART PER BAI WORKMANSHIP STANDARD SCMI00022 CHAPTER 28.10 METHOD 7. | | | 目检 Visual Inspection | OK | OK | OK | OK | OK | | OK |
| ACS5054 | | Profile projector | | | | | | | 2025/12/9 | | |
| 202231125 | | Caliper | | | | | | | 2026/3/17 | | |
| 4808520082 | | Square | | | | | | | 2026/3/17 | | |
| 177332 | | Angle ruler | | | | | | | 2026/3/25 | | |
| SF007 | | R gage | | | | | | | 2026/3/17 | | |



明泰铝业产品质量证明书



MING TAI AL. PRODUCT QUALITY CERTIFICATE

| | | | | | | | | | | | | |
|--------------------------------|--------------------------------|-----------------------------|------------------------------|-------------------------------------|-----------------------|-----------------------|--------------------|--------|------------|-------|-------------|---|
| 订货单位 Customer | 苏州昂铝金属有限公司 | | | | | | 编 号: Serial No: | | MT24121973 | | | |
| 产品名称 Product | 批 号 Lot No | 合 金 状 态 Alloy And Temper | | 规格 (mm) Dimension | | | | | | | | |
| 铝板/铝带 | YRA2411N56192 | 5052 H32 | | 1.6*1250.0*C | | | | | | | | |
| 技 术 标 准 Technique Standard | | GB/T 3880-2012 | | 化 学 成 分 标 准 Composition Standard | | | GB/T 3190-2020 | | | | | |
| 化学成分 % Chemical Composition | | | | | | | | | | | | |
| 元素 Element | Si | Fe | Cu | Mn | Mg | Cr | Zn | Na | Ti | Al | 其它 单个 合计 | |
| 标准值 Standard Value | ≤0.25 | ≤0.4 | ≤0.1 | ≤0.1 | 2.2-2.8 | 0.15-0.3 5 | ≤0.1 | --- | --- | 余量 | | |
| 实测值 Measured Value | 0.103 | 0.361 | 0.022 | 0.058 | 2.419 | 0.181 | 0.024 | 0.0001 | 0.017 | 96.79 | - | - |
| 力学性能 Mechanical Property | | | | | | | | | | | | |
| 取样方法 Sampling Method | 抗拉强度 (MPa) Tensile Strength | | 屈服强度 (MPa) Yield Strength | | 延伸率 (%) Elongation | | | | | | | |
| 纵向 | 标准值 Standard Value | 实测值 Measured Value | 标准值 Standard Value | 实测值 Measured Value | 标准值 Standard Value | 实测值 Measured Value | | | | | | |
| | 210-260 | 221 | ≥130 | 166 | ≥7 | 12 | | | | | | |
| 杯 凸 Cup Bulge | 标准值 Standard Value | — | | 制耳率 (%) Earing | 标准值 Standard Value | — | | | | | | |
| | 实测值 Measured Value | — | | | 实测值 Measured Value | — | | | | | | |
| 90° 折弯 90° bend | 合格 | | 其他 Others | | 合格 | | | | | | | |
| 表面质量 Surface Control | 合格 | | 几何尺寸 Dimension Control | | 合格 | | | | | | | |
| 综合判定 Overall Conclusion | 合格 | | | | | | | | | | | |

填表人: 闫含

Inspector:

河南明泰铝业股份有限公司

地址: 河南省巩义市回郭镇开发区北部

电话: 86-371-64234995 64235833

审批人: 杨峰

Approv


质量专用章

日期: 2024年12月10日

Date:

邮编: 451283



| | | |
|--------------------------------------|---|---|
| DOCUMENT NUMBER: QMS100107 | TITLE: Manufacturer's Affidavit (COO) |  |
| REVISION: C | DOCUMENT CLASSIFICATION: | |
| DCO# DCO005380 | 04-Form, Template or Other | |

1 PURPOSE

This document is intended to be used as a manufacturer's affidavit.

2 REFERENCE DOCUMENTS, FORMS

Internal Document References - Reference the related procedures and work instruction documents that explain how to use this form (if applicable).

| Document Number | Document/Form Name |
|-----------------|-------------------------------|
| SCM100111 | First Article Inspection Form |
| QMS101090 | Incoming Inspection |

3 DETAILS


- 3.1 This form is intended to be filled out by suppliers as part of the First Article Inspection process to declare the Country of Origin (COO).
- 3.2 The form affirms that the listed article(s) were exclusively manufactured at a specific facility since a designated date, any foreign components have been significantly altered, and no claims for drawback will be pursued.
- 3.3 The supplier commits to notifying Brooks of any changes that may impact the article's origin.

4 RECORD RETENTION

For Control and Retention of Quality Records, see QMS101517

Confidential: The information is confidential and is to be used only in connection with matters authorized by Brooks and no part of it is to be disclosed to others without prior written permission from Brooks.

| | | |
|--|---|---------------------------|
| Template Number: QMS100833 | Template Name: 04-Form, Template or Other | Template Rev: H |
| Date Printed: Wednesday, April 2, 2025 | This is uncontrolled when printed | PAGE 1 OF 2 |

| | | |
|--------------------------------------|--|---|
| DOCUMENT NUMBER: QMS100107 | TITLE: Manufacturer's Affidavit (COO) |  |
| REVISION: C DCO# DCO005380 | DOCUMENT CLASSIFICATION: 04-Form, Template or Other | |

Manufacturer's Affidavit

I, Yu Wei, declare to the best of my knowledge and belief that the article(s) identified below or as attached were manufactured by WUXI SHAONENG SHEET METAL MANUFACTURING CO.,LTD. at the facility located at NO. 2 WEST JINGUI RD, HUDAI TOWN, BINHU DIST, WUXI, JIANGSU 214161, China.

These articles have been manufactured solely at this location since 09/01/2020, any foreign material which may be contained therein has undergone a substantial transformation and that the article(s) has not and will not be subject to a claim for drawback.

The company agrees to advise you of any changes which may affect the origin of the article as described above.

Name: Yu Wei
Title: Quality Manager
Date: 4/2/2025

Blanket Period: One Year
From: 4/2/2025
To: 4/1/2026

List of Product(s):

| <u>Brooks Automation PN.</u> | <u>Description</u> | <u>Country of Origin</u> |
|------------------------------|-------------------------------------|--------------------------|
| 642832 | COVER,BANDS,FOREARM,UPPER ARM, ITRX | CHN |

yu wei

| | | |
|--------------------|---------------------|---------------------------|
| _____ Signature | _____ QA Manager | _____ 4/2/2025 Date |
| | Position | |

Confidential: The information is confidential and is to be used only in connection with matters authorized by Brooks and no part of it is to be disclosed to others without prior written permission from Brooks.

| | | |
|--|---|---------------------------|
| Template Number: QMS100833 | Template Name: 04-Form, Template or Other | Template Rev: H |
| Date Printed: Wednesday, April 2, 2025 | This is uncontrolled when printed | PAGE 2 OF 2 |



Brooks Automation US, LLC, 15 Elizabeth Drive
Chelmsford, MA 01824

Instructions: complete the form with the exception of the signature, print the form out and sign it and return the scanned document to **Brooks Automation**.

1. Declaration type

☐ **Brooks Automation** declaration to customer

☒ Supplier Declaration to **Brooks Automation**

| | |
|----------------------|--|
| Manufacturer Name | WUXI SHAONENG SHEET METAL MANUFACTURING CO.,LTD. |
| Manufacturer Address | NO. 2 WEST JINGUI RD. HUDAI TOWN. BINHU DIST.WUXI, JIANGSU,CHINA |

2. Covered parts or ☒ see attached list

| Brooks Part Number | Manufacturer part number | Exemption Claimed |
|--------------------|--------------------------|-------------------|
| 642832 | 642832 | / |
| | | |
| | | |
| | | |
| | | |

3. RoHS declaration

Part(s) are (select one) compliant to ☒ **RoHS Directive 2011/65/EU and amendment 2015/863/EU**

☐ **RoHS Directive 2011/65/EU and amendment 2015/863/EU with exemptions** (complete exemption column in above table) ☐ Obsolete ☐ Part is unknown ☐ vendor has not supplied sufficient information (for Brooks only)

*If exemptions are claimed they must be listed with the parts above or on attached list.

4. REACH Declaration

REACH Regulation EC No. 1907/2006 status:

The parts are compliant to the Annex XVII Restrictions

☒ Yes ☐ No

The part does not contain any of the Article 59 Candidate list SVHCs above 0.1%wt/article

☒ Yes ☐ No


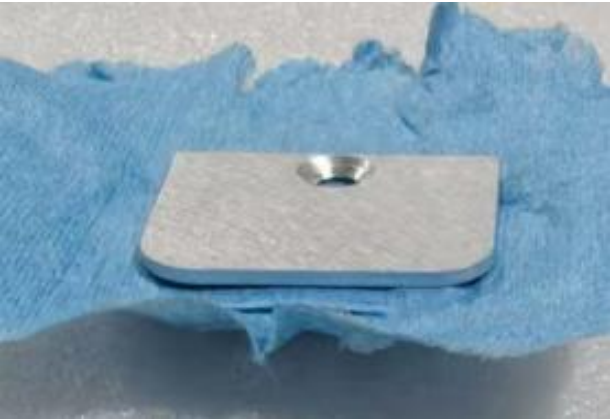
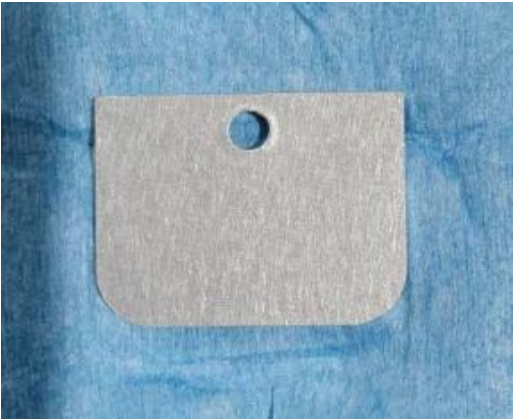
If the part contains an SVHC, please complete the following:

| Article w/SVHC | Substance | CAS% | % by Weight |
|----------------|-----------|------|-------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

5. Signature

Completing the information below indicates, to the best of the signatory's knowledge the above declarations are correct

| | |
|----------------------------------|-------------------------|
| Date | 2025-04-02 |
| Authorized Representative (name) | Yu Wei |
| Title | QA Manager |
| Signature | yu wei |
| Email | yuwei@shaofanggroup.com |

| PACKAGING METHOD PROPOSAL | | | |
|---------------------------|-------|--|---------------------------|
| Supplier Name: | | SHAONENG | Date: 2025/4/2 |
| Part No./Rev.: | | 642832 A | Ref.DWG No./Rev: 642832 A |
| Part Description: | | COVER,BANDS,FOREARM,UPPER ARM,ITRX | |
| Customer Name: | | Brooks Automation US, LLC | |
| 1 | STEP1 |  | |
| 2 | STEP2 |  | |
| 3 | STEP3 |  | |

| | | |
|---|-------|--|
| 4 | STEP4 |  |
|---|-------|--|