



Subject: Supplier Quality Contact Annual Update

**PURPOSE:**

Each supplier is requested to appoint a person as the primary contact for Quality Assurance Activities. This will be the person MACI will contact for quality issues including part and raw material defect resolutions and other special requests.

**SCOPE:**

This procedure applies to all production parts and raw material suppliers to MACI. It is the supplier's responsibility to submit and maintain an updated Supplier Quality Contact Form. Suppliers with multiple manufacturing locations and quality contacts should submit multiple supplier quality contact forms.

**CONTENT:**

The quality contact list should be completed out as follows:

- ① Date: Date form is submitted
- ② Company: supplier name
- ③ Address: Address of primary contact or manufacturing location
- ④ Company Internet address: Internet address of supplier (if applicable)
- ⑤ Product: Brief description of product supplied
- ⑥ Name: Name of contact
- ⑦ Telephone: Telephone number of contact
- ⑧ Position: Position / Title of Contact
- ⑨ Fax: Fax number of contact
- ⑩ E-mail address: E-mail address of contact



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**Michigan Automotive Compressor, Inc.**  
**Supplier Quality Contact**

To: Michigan Automotive Compressor, Inc.  
Quality Assurance Section

Date: 2 \_\_\_\_\_

The following personnel will be responsible for the quality issues of the products that we ship to Michigan Automotive Compressor, Inc.

Company:	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">1</span> _____
Address:	_____
	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">3</span> _____
	_____
Internet Address:	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">4</span> _____
Product Description:	<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">5</span> _____

**PRIMARY CONTACT**

Name: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">6</span> _____	Telephone: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">7</span> _____
Position: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">8</span> _____	Fax: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">9</span> _____
E-Mail Address: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">10</span> _____	

**ALTERNATE CONTACT**

Name: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">6</span> _____	Telephone: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">7</span> _____
Position: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">8</span> _____	Fax: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">9</span> _____
E-Mail Address: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">10</span> _____	

**2<sup>nd</sup> SHIFT CONTACT (IF APPLICABLE)**

Name: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">6</span> _____	Telephone: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">7</span> _____
Position: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">8</span> _____	Fax: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">9</span> _____
E-Mail Address: <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">10</span> _____	