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|  <b>微端科技股份有限公司</b><br><b>Microtips Technology Inc.</b><br>台北縣汐止市康寧街 169 巷 31 號 12F<br>12F NO.31 Lane 169, Kang Ning St., Hsi-Chih, Taipei Hsien,<br>Taiwan, R.O.C<br>WEB: <a href="http://www.microtips.com.tw">http://www.microtips.com.tw</a> | OFFICE:<br>TEL: 886-2-2695-3133<br>FAX: 886-2-2695-8625 |
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|   |                 |            |            |            |
|---|-----------------|------------|------------|------------|
| <b>Engineering Change Notice Inform</b> | <b>Supplier</b> | Edit       | Review     | Approval   |
|   |                 | Sharon     | Danny      | Steele     |
|   |                 | 05/26/2011 | 05/26/2011 | 05/26/2011 |

|  |  |                     |                       |
|--|--|---------------------|-----------------------|
| Title  | New glass supplier   | Customer            | Mouser (MTUSA)        |
| Before Change                                | NMTC-S16101XFYHSAY<br>(CH913-16101XAB)   | After Change        | NMTC-S16101XFYHSAY-11 |
| Reason                                       | <input type="checkbox"/> Design change request from customer<br><input type="checkbox"/> Quality improvement<br><input type="checkbox"/> Cost reduction<br><input type="checkbox"/> Productivity improvement<br><input checked="" type="checkbox"/> Other materials supply and demand (Original driver IC is discontinued) |                     |                       |
| <b>Details of the change being requested</b> |  |                     |                       |
| <b>Before Change</b>                         |  | <b>After Change</b> |                       |
| Part #                                       | Spec   | Qty                 | Location              |
| 25A-16101XDF                                 | LCD:L-16101X(USSH-E333J-3YG)   | 1                   |                       |
| Part #                                       | Spec   | Qty                 | Location              |
| 25I-16101XDF                                 | SFYHS  | 1                   |                       |
| <b>Customer Evaluation Result</b>            |  |                     |                       |
| Department                                   |  | Person in Charge    | Date                  |
| <b>Evaluation Conclusion:</b>                |  |                     |                       |

|   |  |            |        |          |
|---|--|------------|--------|----------|
| Approval  |  | Customer's |        |          |
| Judgment  | Actions Taken  | Edit       | Review | Approval |
| <input type="checkbox"/> Approved<br><input type="checkbox"/> Conditional Approval<br><input type="checkbox"/> Rejected | ☆ If this ECN is rejected, please let supplier know why and what actions required. |            |        |          |
|   |  | Remark:    |        |          |