

PCN Number: SC153301

Notification Date: August 28, 2015

Title: Addition of A MEGA644RFR2	SET as test facility f	for MEGA2564RF	R2, MEGA128	34RFR2,	
Product Identifica MEGA2564RFR2-Z MEGA1284RFR2-Z MEGA644RFR2-ZU	U, -ZUR, -ZF, -ZFR U, - ZUR, -ZF, -ZFR				
Reason for Change	: 🗌 Material / Cor	nposition	🛛 Manufactu	Iring Location	
	Processing / N	Processing / Manufacturing		🗌 Quality / Reliability	
	🗌 Design / Firm	Design / Firmware			
	Datasheet		Other: Te	st facility	
additional test facilit Specific sample only are available for sam orders, only standar Samples can be obta	<u> </u>	93kRF test platforr e new test facility roposed first shipn des will be accepte e <u>www.atmel.com/</u> ample Ordering IEGA2564RFR2-ZF	n. are shown in th nent date. For a ed. <u>Samples</u> Code	ne table below, and all production	
Identification Met	hod to Distinguish C	hange: Date Cod	e		
Qualification Data:	Available (qualification data shall be attached if available)	Will be availa (mm/dd/yr): 08,		Not Applicable	
Samples:	Available	Will be availa (mm/dd/yr): 08,		Not Applicable	
Quantifiable Impa	ct on Quality & Relia	bility: None			
Proposed First Shi	p Date*: November 2	8, 2015			
determined by the estima in supply and demand. C Atmel will continue to shi	Date is the forecasted date ted date of inventory deplet onsequently, although custo o pre-changed product until g shipped to customers afte	tion on the PCN issue omers should be prepa a time in which inven	date. This may be red to receive char tory has been deple	affected by fluctuations nged product on this date,	

Atmel Contact: Please contact your Atmel Sales Representative or Distributor for additional information (when replying via e-mail please include the PCN number in subject line).

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CUSTOMER ACKNOWLEDGEMENT OF RECEIPT: Atmel requests you acknowledge receipt of this PCN. Please complete and email to <u>pcnadm@atmel.com</u> and the Atmel Contact listed above. In your acknowledgement, you can grant approval or request additional information. **Atmel will deem this change accepted unless specific conditions of acceptance are provided in writing within 30 days from the date of this notice.**

To be completed by customer:

Approved

Rejected (Please state reason for rejection):

Company:		
Name:		
Title:		
Date:		
Email		
Address:		
Location:		
Comments:		