Doc. No. : PCN220603
Date : Jun 30, 2022

To : Dear Valued Customers

Product/Process Change Notice

We hereby submit PCN for your review and approval.

Application or type：

Change the packing method of bridge rectifiers series.

Detail of the change：

Keep only the reel packaging and cancel the part number packaging code.

Current：e.g. DB101S-HF Thru. DB107S-HF

Marking Code

Part Number	Marking code	Packaging
DB101SP-HF	DB101S	Tube
DB102SP-HF	DB102S	Tube
DB103SP-HF	DB103S	Tube
DB104SP-HF	DB104S	Tube
DB105SP-HF	DB105S	Tube
DB106SP-HF	DB106S	Tube
DB107SP-HF	DB107S	Tube
DB101ST-HF	DB101S	Reel
DB102ST-HF	DB102S	Reel
DB103ST-HF	DB103S	Reel
DB104ST-HF	DB104S	Reel
DB105ST-HF	DB105S	Reel
DB106ST-HF	DB106S	Reel
DB107ST-HF	DB107S	Reel

XXX = Product type marking code
C = Comchip Logo

Note:
1) Suffix code after part number to specify packaging item .

Packaging	Code
TUBE PACK	P
REEL PACK	T

Standard Packaging

Case Type	TUBE PACK	
	TUBE (pcs)	BOX (pcs)
DBS	50	5,000

Case Type	REEL PACK	
	REEL (pcs)	Reel Size (inch)
DBS	1,000	13

After the change：e.g. DB101S-HF Thru. DB107S-HF

Marking Code

Part Number	Marking code
DB101S-HF	DB101S
DB102S-HF	DB102S
DB103S-HF	DB103S
DB104S-HF	DB104S
DB105S-HF	DB105S
DB106S-HF	DB106S
DB107S-HF	DB107S

XXX = Product type marking code
C = Comchip Logo

Standard Packaging

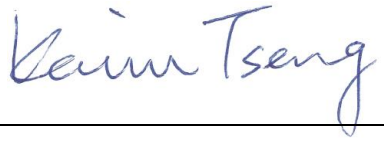
Case Type	REEL PACK	
	REEL (pcs)	Reel Size (inch)
DBS	1,000	13

Reason for the change：

Due to low demand, only reel packaging is expected to be sold, so cancel the part number suffix T, P.

Evaluation items：

Package Type	Part No.	Alternative Part No.
DBS	DB101SP-HF Thru. DB107SP-HF	DB101S-HF Thru. DB107S-HF
DBS	DB101ST-HF Thru. DB107ST-HF	
DFS	DF005SP-HF Thru. DF10SP-HF	DF005S-HF Thru. DF10S-HF
DFS	DF005ST-HF Thru. DF10ST-HF	
DFS	DF15005SP-G Thru. DF1510SP-G	DF15005S-G Thru. DF1510S-G
DFS	DF15005ST-G Thru. DF1510ST-G	
DFS	DF2005SP-G Thru. DF210SP-G	DF2005S-G Thru. DF210S-G
DFS	DF2005ST-G Thru. DF210ST-G	

Implemented from： Last time buy：Sep 30, 2022 Effective Date：Dec 30, 2022	
R&D Dept. Signature： 	QA Dept. Signature： 

Answer To PCN

Please complete the form below duly signed and fax back to Comchip Technology Co.

Please select your answer 1. Approved this PCN 2. Approved this PCN with conditions 3. Disapproved this PCN	Date Responsibility By
Please specify the condition or explain the reason if you select 2 or 3.	

Unless a Comchip Technology Co., Ltd. Sales representative is contacted in writing within 30 days of the posting of this notice, all changes described in this announcement are considered approved.