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Custom Zero Ohm Jumper Questionnaire

Form Rev Jan 1, 2019



Date _____ 20____

Position Engineering Purchasing

Contact _____ Title _____

Company _____ Tel _____ Ext _____

email _____ Project Ref# _____

Device or Original Mfgr PN _____ See Sketch Below See Attached Data Sheet

Pins Total: _____ Pitch: _____ mm Inch

Jumper Pin Connections: _____ to _____ _____ to _____ _____ to _____ _____ to _____
 _____ to _____ _____ to _____ _____ to _____ _____ to _____
 _____ to _____ _____ to _____ _____ to _____ _____ to _____

Application: _____ New board design
 _____ Replace obsolete device
 _____ Experimental project
 _____ Other _____

Max Voltage: _____ Maximum Current: _____ Frequency: _____ Other Spec: _____

Quantity: Estimated Annual Usage _____ pcs One-time buy only _____ pcs

Delivery: Samples needed by _____ Mass production starts _____

Sketch of Device Package <input type="checkbox"/> Next page	Schematic Jumper Connections

Return this questionnaire to info@TopLine.tv or Fax +1-478-451-3000