



1941 Heath Parkway, Ste. #1
Fort Collins, CO 80524
TEL 800-589-4315
TEL 970-407-0426
FAX 970-416-1208
www.hivizsights.com

North Pass®

Certificate of Conformance

Date: _____

Purchase Order: _____

Supplier Company Name: _____

Supplier Address: _____

This certificate assures that the items listed below conform to all the conditions of Purchase Order _____ and their engineering drawings.

| PART NUMBER | DESCRIPTION |
|-------------|-------------|
| | |
| | |
| | |
| | |

BY: _____

SIGNATURE

DATE

TITLE

SIGNATURE

DATE

(Witness)