

Checklist for Custom Design LCD Panel

APPLICATION	<input type="checkbox"/> Clock <input type="checkbox"/> Car Stereo <input type="checkbox"/> Instruments <input type="checkbox"/> Telephone <input type="checkbox"/> Game <input type="checkbox"/> OA Machine <input type="checkbox"/> Calculator <input type="checkbox"/> Watch <input type="checkbox"/> Camera <input type="checkbox"/> Others _____			
DIMENSIONS				
		Item	Size (mm)	
		A.		G.
		B.		H.
		C.		I.
		D.		J.
		E.		K.
	F.		L.	
LCD CONFIGURATION	Viewing Direction ① <input type="checkbox"/> ② <input type="checkbox"/> ③ <input type="checkbox"/> ④ <input type="checkbox"/> ⑤ <input type="checkbox"/> ⑥ <input type="checkbox"/> ⑦ <input type="checkbox"/> Others 			
DISPLAY MODE	<input type="checkbox"/> TN <input type="checkbox"/> HTN <input type="checkbox"/> STN: (<input type="checkbox"/> Gray <input type="checkbox"/> Yellow <input type="checkbox"/> Others _____) <input type="checkbox"/> FSTN			
	<input type="checkbox"/> Positive <input type="checkbox"/> Negative			
	<input type="checkbox"/> Reflective <input type="checkbox"/> Transflective <input type="checkbox"/> Transmissive			
POLARIZER	Front	<input type="checkbox"/> Transmissive <input type="checkbox"/> Anti-Glare <input type="checkbox"/> UV -Filter <input type="checkbox"/> Others _____		
	Rear	<input type="checkbox"/> Reflective <input type="checkbox"/> Transflective <input type="checkbox"/> Transmissive <input type="checkbox"/> Anti-Glare		
VIEW ANGLE	<input type="checkbox"/> 3 o'clock <input type="checkbox"/> 6 o'clock <input type="checkbox"/> 9 o'clock <input type="checkbox"/> 12 o'clock			
CONNECTOR	<input type="checkbox"/> Zebra Connector <input type="checkbox"/> Heat Seal <input type="checkbox"/> Pins, Pin Pitch _____ mm, Total of _____ pins			
TEMPERATURE RANGE	<input type="checkbox"/> Operating Temp. (0°C ~50 °C), Storage Temp. (-20°C ~70 °C) <input type="checkbox"/> Operating Temp. (-20°C ~70 °C), Storage Temp. (-30°C ~80 °C) <input type="checkbox"/> Others : Operating Temp. _____, Storage Temp. _____			
DRIVE METHOD	Driving Voltage	Duty	Bias	Driver IC
	_____ V	<input type="checkbox"/> Static <input type="checkbox"/> 1/ _____	1/ _____	_____ Hz
ORDER VOLUME	_____ pcs/ month			
OTHER CONDITIONS				
COMPANY: _____ ADDRESS: _____ TELEPHONE: _____ FAX NUMBER : _____ E-MAIL ADDRESS: _____ CONTACT PERSON: _____ Date of Inquiry : _____				

*** Please attach drawing with graphic pattern and wiring connections, if available.