

PRODUCT/PROCESS CHANGE NOTICE (PCN)				
PCN Number: 22012 Date Issued: April 11, 2022 Product(s) Affected:			Means of Distinguishing Changed Devices: Product Mark: Back Mark	
SP3243EBCA-L/TR SP3243EBEY-L SP3243ECA-L/TR SP3243EEA-L/TR SP3243EHCA-L/TR SP3243EUCY-L/TR SP3243EUEY-L/TR Manufacturing Location Affect Date Effective (90 day window Date Issued +90 days:	Assembly: Greatek,		□ Date Code □ Other: Lot number	
Contact: Your local MaxLinear Marketing Representative or contact our Customer Support team by creating a Support Ticket at http://www.maxlinear.com/support/createcase Phone: 1-760-692-0711			Attachment: Yes No Samples: Request from MaxLinear Marketing Representatives	
Description and Purpose of Change: MaxLinear has qualified Key Foundry wafer foundry in order to increase production capacity and to facilitate long term support of the product line. The wafer process is 0.18um BCD. There is no change to form, fit, function and the products meet existing datasheet specifications. In addition to the currently qualified ANST site, Greatek is added as an alternate site for package, assembly, and test. There are no changes in device reliability. Note: Users who rely on DC, diode characteristics during ICT testing should take caution certain I/O characteristics may appear changed due to the proprietary I/O structures employed by Key Foundry. These DC / diode characteristic differences are not guaranteed nor required to ensure full design functionality per datasheet. Adjustments at ICT testing may be required to prevent false failures. Die Technology Wafer Fabrication Assembly Process Equipment Material Testing Product Design Manufacturing Site Data Sheet Yield Enhancement Software Other: Other: Reliability/Qualification Summary: Reliability report available upon request.				



PCN-22012 SP324EXXXX Additional Suppliers Process Change Notification

Customer Acknowledgement of Receipt within 30 da of change.	ys of issu	ue. Lack of acknowledgement within 30 days constitutes acceptance		
Please fax or email this form to the contact above after completing the following information:				
Customer:	_	Name:		
Title:	_	Date:		
E-Mail:	_Phone: _			
Fax:				
Approval for shipments prior to effective date				
Customer Comments (Optional):				