

# GLAST LAT Tracker Subsystem

## TOWER ASSEMBLY and TEST FLOW CHART

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*Tower P/N:*

LAT-DS-0722

*Revision number:*

3

*Tower S/N:*

3

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*Assembly supervisor*

Emilio Rapposelli

*Assembly operator 1*

Francesco Bellardi

*Assembly QA responsible*

Aldo Troianiello

*Assembly operator 2*

Marco Ceccanti

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*Tower  
Assembly*

*Tray Assembling*

*Top Tray (n° 18)*

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
T	008	1215

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
3/15/2005 2:52:26 PM	
<b>Flag</b>	
OK	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/15/2005 2:52:34 PM	

**Mid Tray (n° 17)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
M	034	1165

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
3/15/2005 5:17:26 PM	
<b>Flag</b> <input type="text" value="OK"/>	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/15/2005 5:17:30 PM	

**Mid Tray (n° 16)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
M	033	1165

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
3/15/2005 5:18:03 PM	NCR metal chip found on bottom side. BOX 108
<b>Flag</b> <input type="text" value="OK"/>	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/15/2005 5:18:08 PM	

**Mid Tray (n° 15)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
M	054	1165

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
3/15/2005 5:19:28 PM	NCR metal chip found on upper side. BOX 106
<b>Flag</b>	<input type="checkbox"/> OK

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/15/2005 5:19:31 PM	

**Mid Tray (n° 14)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
M	003	1150

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
3/15/2005 5:21:00 PM	Small Piece of BIAS (2 mm) cutted on the corner because not attached to the tray
<b>Flag</b>	<input type="checkbox"/> OK

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/15/2005 5:22:01 PM	

**Mid Tray (n° 13)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
M	109	1175

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
3/15/2005 5:22:23 PM	NCR metal chip found on upper side. BOX 112
<b>Flag</b> <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/15/2005 5:22:35 PM	

**Mid Tray (n° 12)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
M	098	1170

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
3/15/2005 5:23:38 PM	NCR metal chip found on upper side. BOX 117
<b>Flag</b> <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/15/2005 5:23:52 PM	

**Mid Tray (n° 11)**

<b>IDENTIFICATION:</b>		
tray type:	tray S/N:	tray weight (gr):
<input type="text" value="M"/>	<input type="text" value="087"/>	<input type="text" value="1140"/>

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy):	Note
<input type="text" value="3/15/2005 5:24:22 PM"/>	<input type="text"/>
Flag <input type="text" value="OK"/>	

<b>MOUNTING:</b>	
Date (mm/dd/yy):	Note
<input type="text" value="3/15/2005 5:24:26 PM"/>	<input type="text"/>

**Mid Tray (n° 10)**

<b>IDENTIFICATION:</b>		
tray type:	tray S/N:	tray weight (gr):
<input type="text" value="M"/>	<input type="text" value="070"/>	<input type="text" value="1165"/>

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy):	Note
<input type="text" value="3/16/2005 10:30:29 AM"/>	<input type="text"/>
Flag <input type="text" value="OK"/>	

<b>MOUNTING:</b>	
Date (mm/dd/yy):	Note
<input type="text" value="3/16/2005 10:30:32 AM"/>	<input type="text"/>

**Mid Tray (n° 09)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
M	086	1145

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
3/16/2005 10:30:45 AM	Pencil tip of 3 mm on a ladder on up side
<b>Flag</b> <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/16/2005 10:31:45 AM	

**Mid Tray (n° 08)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
M	084	1165

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
3/16/2005 10:47:25 AM	
<b>Flag</b> <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/16/2005 10:49:14 AM	

**Mid Tray (n° 07)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
M	104	1150

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
3/16/2005 11:31:29 AM	
<b>Flag</b> <input type="text" value="OK"/>	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/16/2005 11:31:26 AM	

**Heavy Tray (n° 06)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
H	013	2625

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
3/17/2005 11:38:09 AM	
<b>Flag</b> <input type="text" value="OK"/>	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/17/2005 11:38:11 AM	

**Heavy Tray (n° 05)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
H	029	2630

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
3/17/2005 2:57:33 PM	
<b>Flag</b> <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/17/2005 2:57:36 PM	

**Heavy Tray (n° 04)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
H	002	2600

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
3/17/2005 2:57:54 PM	
<b>Flag</b> <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/17/2005 2:57:56 PM	

**Heavy Tray (n° 03)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
<input type="text" value="H"/>	<input type="text" value="021"/>	<input type="text" value="2660"/>

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
<input type="text" value="3/17/2005 2:58:14 PM"/>	<input type="text"/>
<b>Flag</b> <input type="text" value="OK"/>	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
<input type="text" value="3/17/2005 2:58:17 PM"/>	<input type="text"/>
<input type="text"/>	

**Light Tray (n° 02)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
<input type="text" value="L"/>	<input type="text" value="007"/>	<input type="text" value="920"/>

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
<input type="text" value="3/17/2005 3:01:57 PM"/>	<input type="text"/>
<b>Flag</b> <input type="text" value="OK"/>	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
<input type="text" value="3/21/2005 3:02:03 PM"/>	<input type="text"/>
<input type="text"/>	

**Light Tray (n° 01)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
L	014	925

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
<b>Flag</b> <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/21/2005 3:02:21 PM	

**Bottom Tray (n° 00)**

<b>IDENTIFICATION:</b>		
<b>tray type:</b>	<b>tray S/N:</b>	<b>tray weight (gr):</b>
B	008	2135

<b>VISUAL INSPECTION:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note</b>
3/17/2005 3:02:34 PM	
<b>Flag</b> <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note</b>
3/17/2005 3:02:39 PM	

Cables +X (C0-C1)

<b>C-0</b> <i>(-Y corner)</i> cable +XC0 sn: C0-019	<b>VISUAL INSPECTION:</b>
	<b>Date (mm/dd/yyyy):</b> <input type="text" value="3/24/2005"/> <b>Flag:</b> <input type="text" value="OK"/> <b>Note:</b> <input type="text" value="SN 0067 DATE 0044"/>
<b>C-1</b> <i>(+Y corner)</i> cable +XC1 sn: C1-013	<b>MOUNTING:</b>
	<b>Date (mm/dd/yy):</b> <input type="text" value="3/19/2005"/> <b>Note:</b> <input type="text" value="Cable mounted as per INFN/PI/NCR447 disposition"/>
	<b>VISUAL INSPECTION:</b>
	<b>Date (mm/dd/yyyy):</b> <input type="text" value="3/19/2005"/> <b>Flag:</b> <input type="text" value="OK"/> <b>Note:</b> <input type="text" value="SN 0087 DATE 0449"/>
	<b>MOUNTING:</b>
	<b>Date (mm/dd/yyyy):</b> <input type="text" value="3/19/2005"/> <b>Note:</b> <input type="text"/>

**Cables +Y (C2-C3)**

**C-2  
(+X corner)**

**cable +YC2 sn:**

C2-006

**VISUAL INSPECTION:**

**Date (mm/dd/yyyy):** **Flag:** **Note:**

3/19/2005

OK

SN 0047 DATE 0444

**MOUNTING:**

**Date (mm/dd/yy):** **Note:**

3/19/2005

**C-3  
(-X corner)**

**cable +YC3 sn:**

C3-009

**VISUAL INSPECTION:**

**Date (mm/dd/yyyy):** **Flag:** **Note:**

3/19/2005

OK

SN 0048 DATE 0505

**MOUNTING:**

**Date (mm/dd/yyyy):** **Note:**

3/19/2005

**Cables -X (C4-C5)**

**C-4  
(-Y corner)**

**cable -XC5 sn:**

C4-001

<b>VISUAL INSPECTION:</b>		
<b>Date (mm/dd/yyyy):</b>	<b>Flag:</b>	<b>Note:</b>
3/19/2005	OK	SN0011 DATE 0426

<b>MOUNTING:</b>	
<b>Date (mm/dd/yy):</b>	<b>Note:</b>
3/19/2005	

**C-5  
(+Ycorner)**

**cable -XC6 sn:**

C5-012

<b>VISUAL INSPECTION:</b>		
<b>Date (mm/dd/yyyy):</b>	<b>Flag:</b>	<b>Note:</b>
3/19/2005	OK	SN 0053 DATE 0502

<b>MOUNTING:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note:</b>
3/19/2005	

**Cables -Y (C6-C7)**

**C-6  
(+X corner)**

**YC6 sn:**

C6-006

**VISUAL INSPECTION:**

**Date (mm/dd/yyyy):** **Flag:** **Note:**

3/19/2005

OK

SN 0049 DATE 0433

**MOUNTING:**

**Date (mm/dd/yy):** **Note:**

3/19/2005

**C-7  
(-X corner)**

**YC7 sn:**

C7-011

**VISUAL INSPECTION:**

**Date (mm/dd/yyyy):** **Flag:** **Note:**

3/19/2005

OK

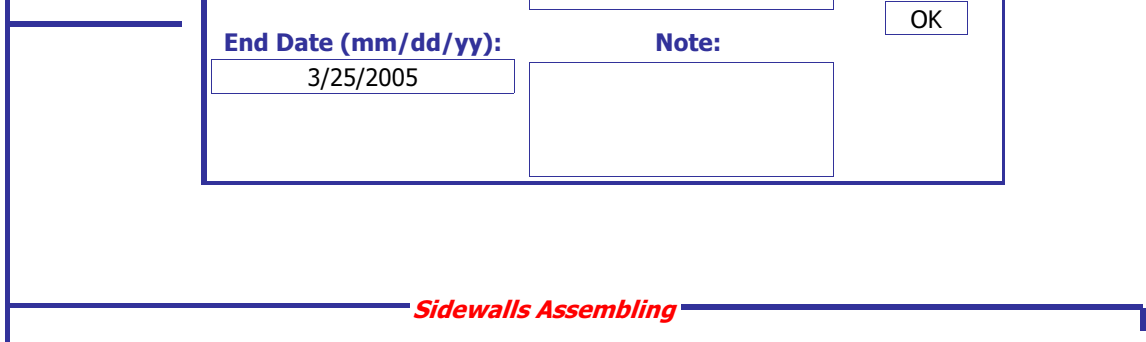
SN 0122 DATE 0501

**MOUNTING:**

**Date (mm/dd/yyyy):** **Note:**

3/19/2005

<b>1st FUNCTIONAL TEST CPT:</b>		
<b>Start Date (mm/dd/yy):</b>	<b>Note:</b>	
<input type="text" value="3/24/2005"/>	<input type="text" value="second run after tray repair"/>	
		<b>Flag:</b>
		<input type="text" value="OK"/>
<b>End Date (mm/dd/yy):</b>	<b>Note:</b>	
<input type="text" value="3/25/2005"/>	<input type="text"/>	



**Sidewalls +X**  
serial nb:

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy):	Note
<input type="text" value="2/12/2004"/>	<input type="text"/>
<b>Flag</b>	<input type="text" value="OK"/>

<b>MOUNTING:</b>	
Date (mm/dd/yy):	Note
<input type="text" value="2/12/2004"/>	<input type="text" value="No S/N and P/N appear on sidewall"/>

**Sidewalls +X**  
serial nb:

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy):	Note
<input type="text" value="1/7/2004"/>	<input type="text"/>
<b>Flag</b>	<input type="text" value="OK"/>

<b>MOUNTING:</b>	
Date (mm/dd/yy):	Note
<input type="text" value="1/7/2004"/>	<input type="text"/>

**Sidewalls  
+X**

serial nb:  
003

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 2/17/2005	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 2/17/2005	Note

**Sidewalls  
+X**

serial nb:  
002

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 10/3/2005	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 10/3/2005	Note

**Sidewalls  
+X**

serial nb:  
005

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 3/25/2005	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 3/25/2005	Note

**Sidewalls  
+X**

serial nb:  
006

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 4/20/2005	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 4/20/2005	Note

**Sidewalls  
-X**

serial nb:

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 2/12/2004	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 2/12/2004	Note No S/N and P/N appear on sidewall

**Sidewalls  
-X**

serial nb:  
002

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 1/7/2004	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 1/7/2004	Note

**Sidewalls  
-X**

serial nb:  
003

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 2/17/2005	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 2/17/2005	Note

**Sidewalls  
-X**

serial nb:  
002

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 10/3/2005	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 10/3/2005	Note

**Sidewalls  
-X**

serial nb:  
005

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 3/25/2005	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 3/25/2005	Note

**Sidewalls  
-X**

serial nb:  
006

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy):	Note
4/20/2005	
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy):	Note
4/20/2005	

**Sidewalls  
+Y**

serial nb:

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy):	Note
2/12/2004	
Flag <input type="checkbox"/>	

<b>MOUNTING:</b>	
Date (mm/dd/yy):	Note
2/12/2004	No S/N and P/N appear on sidewall

**Sidewalls  
+Y**

serial nb:  
002

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy):	Note
1/7/2004	
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy):	Note
1/7/2004	

**Sidewalls  
+Y**

serial nb:  
003

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 2/17/2005	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 2/17/2005	Note

**Sidewalls  
+Y**

serial nb:  
002

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 10/3/2005	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 10/3/2005	Note

**Sidewalls  
+Y**

serial nb:  
005

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 3/25/2005	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 3/25/2005	Note

**Sidewalls  
+Y**

serial nb:  
006

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy):	Note
4/20/2005	
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy):	Note
4/20/2005	

**Sidewalls  
-Y**

serial nb:

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy):	Note
2/12/2004	No S/N and P/N appear on sidewall
Flag <input type="checkbox"/>	

<b>MOUNTING:</b>	
Date (mm/dd/yy):	Note
2/2/2004 4:34:40 PM	sidewalls with conter sink too deep

**Sidewalls  
-Y**

serial nb:  
002

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy):	Note
1/7/2004	
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy):	Note
1/7/2004	

**Sidewalls  
-Y**

serial nb:  
003

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 2/17/2005	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 2/17/2005	Note

**Sidewalls  
-Y**

serial nb:  
002

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 10/3/2005	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 10/3/2005	Note

**Sidewalls  
-Y**

serial nb:  
005

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy): 3/25/2005	Note
Flag <input type="checkbox"/> OK	

<b>MOUNTING:</b>	
Date (mm/dd/yy): 3/25/2005	Note

<b>VISUAL INSPECTION:</b>	
Date (mm/dd/yyyy):	Note
4/20/2005	
Flag: <input type="checkbox"/> OK	

**Sidewalls  
-Y**

serial nb:

<b>MOUNTING:</b>	
Date (mm/dd/yy):	Note
4/20/2005	

<b>ALIGNMENT:</b>	
Date (mm/dd/yyyy):	Note:
3/25/2005	
Flag: <input type="checkbox"/> OK	

<b>BASE PLATE ASSEMBLING:</b>	
Date (mm/dd/yyyy):	Note:
3/25/2005	
Flag: <input type="checkbox"/>	

**2nd FUNCTIONAL TEST :**

**Start Date (mm/dd/yy):**

3/29/2005

**Note:**

done after Bracket assembly

**Flag:**

**End Date (mm/dd/yy):**

3/30/2005

**Note:**

**TOWER Turn Over :**

**Date (mm/dd/yyyy):**

3/29/2005

**Note:**

**Flag:**

<b>BRACKET ASSEMBLING:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note:</b>
3/29/2005	
<b>Flag:</b> <input type="text" value="OK"/>	

<b>SHIPPING TO ALENIA:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note:</b>
3/31/2005	
<b>Flag:</b> <input type="text"/>	

<b>THERMO-VACUUM:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note:</b>
4/8/2005	ended 4/18
<b>Flag:</b> <input type="text" value="OK"/>	

**Test @ALENIA**

<b>VIBRATIONAL:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note:</b>
4/4/2005	ended 4/5
<b>Flag:</b> <input type="text" value="OK"/>	

<b>SHIPPING TO INFN/PISA:</b>	
<b>Date (mm/dd/yyyy):</b>	<b>Note:</b>
<input type="text"/>	NA
<b>Flag:</b> <input type="text"/>	

<b>Verify</b>	<b>TOWER BOX VISUAL INSPECTION:</b> Date (mm/dd/yyyy): <input type="text"/> NA Note: <input type="text"/> Flag: <input type="text"/>
	<b>MEASUREMENT CMM:</b> Date (mm/dd/yyyy): <input type="text"/> NA Note: <input type="text"/> Flag: <input type="text"/>
	<b>FUNCTIONAL TEST:</b> Date (mm/dd/yyyy): <input type="text"/> NA Note: <input type="text"/> Flag: <input type="text"/>
	<b>PACKAGING:</b> Date (mm/dd/yyyy): <input type="text" value="4/19/2005"/> Note: <input type="text"/> Flag: <input type="text" value="OK"/>
	<b>SHIPPING TO SLAC:</b> Date (mm/dd/yyyy): <input type="text" value="4/20/2005"/> Note: <input type="text"/> Flag: <input type="text" value="OK"/>