



Certificate of Calibration

Certificate Number: 202144

Manufacturer: MITUTOYO
Model: 500-196
Asset Number: Sample-7
Serial Number: Sample-7
Nomenclature: 6" DIGITAL CALIPER
Date Arrived : Friday, June 17, 2011
Cal Date: 17-June-2011
Cal Due: 17-June-2012

CUSTOMER:
SAMPLE CUSTOMER
100 CHERRY HILL DRIVE
DANVERS MA 01923
PO # : 123456
Department : N/A

Environmental Conditions: 70.0°F 40 %RH

Condition Received/Returned: In/In

Calibration Technician: Jim Jezowski Jr.
Remarks:
Calibration Procedure Used: DC-2-REV:00

Acculab Measurement Standards Inc. certifies that the above listed instrument has been calibrated to the manufacturer's specifications, if available, and/or to limits specified by customer, using standards traceable to the National Institute of Standards and Technology or which have been derived from accepted values of natural physical constants or through the use of the ratio method of self calibration techniques. Methods used are in accordance with FDA(GMP), MIL-STD 45662/A, ANSI Z-540-1994 and ISO 10012-1. Per ANSI Z-540-1 total uncertainty ratios exceed the minimum 4:1 requirement unless otherwise noted.

Standards Used for Calibration of : MITUTOYO 500-196		
Asset Number	Description	Due Date
500131	SIZE CONTROL MASTER RING GAGES MASTER RING GAGES	30 Jun 2011
500243	DOALL 119R GAGE BLOCK SET	01 Feb 2012

Signed: 
President & Technical Manager

Date: Friday, June 17, 2011

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ACCULAB
Measurement Standards Laboratory
Report of Calibration
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Customer:	_____	Date of Cal:	_____
Manufacturer:	Mitutoyo	Cal Due Date:	_____
Model Number:	500-196	Test Number:	_____
Description:	6" CALIPER	Temperature/Humid:	_____
Serial Number:	_____	Customer ID #:	_____

Test Description	Data as Received	After Adjustment	Test Limits	OT
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"OD" ACCURACY

.5"	_____	_____	± 0.001 "	_____
1.0"	_____	_____		_____
2.0"	_____	_____		_____
4.0"	_____	_____		_____
6.0"	_____	_____		_____

"ID" LINEAR CORRELATION (Where Applicable)

_____	_____	± 0.001 "	_____
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DEPTH ROD LINEAR CORRELATION (Where Applicable)

_____	_____	± 0.001 "	_____
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PARALLELISM OF JAWS

_____	_____	Pass/Fail	_____
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Remarks: _____

Certified By: _____ Date: _____