



PRODUCT CHANGE NOTICE (PCN)

PART NUMBER(S): XRT73R12IB-F, XRT75R12IB-F, XRT75R12DIB-F, XRT83L314IB-F, XRT83SL314IB-F, XRT94L31IB-F, XRT94L33IB-F		PCN No.: 08-1211-01
		DATE: 12/16/08
PART DESCRIPTION: Please refer to the applicable datasheets at www.exar.com .		
LEVEL OF CHANGE: <input type="checkbox"/> Level I, Customer Approval. <input checked="" type="checkbox"/> Level II, Customer Information.		
PRODUCT ATTRIBUTE AFFECTED: <input type="checkbox"/> Material Change <input type="checkbox"/> Data Sheet Change <input type="checkbox"/> Design Change <input type="checkbox"/> Package Change <input type="checkbox"/> Process Change <input type="checkbox"/> Packing / Shipping <input checked="" type="checkbox"/> Other, Explain: Ordering part number		
DESCRIPTION OF THE PROPOSED CHANGE: Ordering part numbers are changed from -F to -L. There is no change to Form, Fit, or Functions as specified in the applicable datasheets. <ul style="list-style-type: none"> ▪ XRT73R12IB-F is changed to XRT73R12IB-L ▪ XRT75R12IB-F is changed to XRT75R12IB-L ▪ XRT75R12DIB-F is changed to XRT75R12DIB-L ▪ XRT83L314IB-F is changed to XRT83L314IB-L ▪ XRT83SL314IB-F is changed to XRT83SL314IB-L ▪ XRT94L31IB-F is changed to XRT94L31IB-L ▪ XRT94L33IB-F is changed to XRT94L33IB-L 		
REASON FOR CHANGE: Exar is redefining the “-F” and – “L” portion of part number nomenclature as follows: <ul style="list-style-type: none"> ▪ - F = Halogen-free(Green) /Pb-free/RoHS compliant ▪ - L = Pb-free/RoHS compliant 		
DATE OF SAMPLES AVAILABLE: N/A	DATE OF QUALIFICATION COMPLETED: N/A	

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ESTIMATED CHANGE DATE OR DATE CODE: 1/1/2009	SUPPORTING DATA: Applicable procedures
<input checked="" type="checkbox"/> STANDARD DISTRIBUTION <input type="checkbox"/> CUSTOM DISTRIBUTION	
PERSON TO CONTACT WITH QUESTIONS: Lisa Bedard Exar Corporation 1 Holiday Avenue West Tower, Suite 450 Pointe-Claire, Quebec H9R 5N3 Tel: (514) 429-1010 ext 210 Fax: (514) 695-2548 Please acknowledge receipt of this PCN.	

Acknowledged:

Signature

Printed Name

Company

Title

Date

Comments: _____

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