

Engineering/Process Change Notice

ECN/PCN No.: 3681

For Manufacturer					
Product Description:	Abracon Part Number / Part Series:		⊠ Series		
LOW ESR, LOW CL CERAMIC SMD CRYSTAL	ABM11W		☐ Part Number		
Affected Revision:	New Revision:	Application:	☐ Safety		
D	E		⋈ Non-Safety		

Prior to Change:

Electrical Specifications

Parameters	Minimum	Typical	Maximum	Units	Notes
Equivalent series resistance (R1) (over -40°C to +125°C)		< 150	200	Ω	16.0000 – 17.9999MHz
		< 80	120		18.0000 – 20.9999MHz
		< 60	100		21.0000 – 29.9999MHz
		< 50	80		30.0000 - 37.9999MHz
		< 30	60		38.0000 – 50.0000MHz

After Change:

Electrical Specifications

Parameters	Minimum	Typical	Maximum	Units	Notes
Equivalent series resistance "R1" (over Operating Temperature Range) (CL=4pF)		< 150	200	Ω	16.0000 – 17.9999MHz
		< 80	120		18.0000 – 20.9999MHz
		< 60	100		21.0000 – 29.9999MHz
		< 50	80		30.0000 – 37.9999MHz
		< 30	60		38.0000 – 50.0000MHz
Equivalent series resistance "R1" (over Operating Temperature Range (CL=6pF, 7pF, 8pF)		< 120	150		16.0000 – 17.9999MHz
		< 80	120		18.0000 – 20.9999MHz
		< 60	100	Ω	21.0000 – 23.9999MHz
		< 30	50		24.0000 – 29.9999MHz
		< 30	50		30.0000 – 37.9999MHz
		< 30	40		38.0000 – 50.0000MHz

Cause/Reason for Change:

Abracon improved product electrical performance for the crystal Equivalent Series Resistance (R1) parameter.

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Change Plan				
Effective Date: 10/05/2020	Additional Remarks:			

Change Declaration:

- All previous (initial release through revision D) Abracon shipments comply with revision E of the ABM11W datasheet.
- All product delivered after the below published effectivity date shall comply with revision E of the ABM11W datasheet.

Issued Date: 10/05/2020	Issued By: Brooke Cushman	Issued Department: Engineering
Approval:	Approval:	Approval:
Thomas Culhane Engineering Director	Reuben Quintanilla Quality Director	Ying Huang Purchasing Director

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For Abracon EOL only					
Last Time Buy (if applicable):		Alternate Part Number / Part Series:			
Additional Approval:	Additional Approval:		Additional Approval:		
	Customer Appro	oval (If Applicable)		
Qualification Status:					
		\square Not accepted			
Note: It is considered approved if there is no feedback from the customer 1 month after ECN/PCN is released.					
Customer Part Number:		Customer Project:			
Company Name:	Company Representative:		Representative Signature:		
Customer Remarks:					

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