REJ19B0926-0101 Rev.1.01

RENESAS ELECTRONICS SINGLE-CHIP 16-BIT MICROCOMPUTER R5F21324CNXXXSP

ROM PROGRAMMING CONFIRMATION FORM

	ROM r	number				
	pt	Date:				
	Receipt	Section mgr signature	PIC signature			

		Note: Please fill in all items mark									marked *			
*		Company						Т	EL		9	b	Submitt	ted by
	Applicant	Name						()		int			
	тррпост	Date issued	Date:		Year / N	lonth / Date	Э				Applicant	ō		
	★ 1. Mask file Please kindly verify and confirm the mask file in the submitted CD-R prior to submission. Please submit mask files on CD-R. And the number of the mask file must be 1 mask file per one CD-R.													
	Part Number													
	File Code									(hexadecimal notation)				
	Mask								.MSK	(no mo	(no more than 8 characters)			
	□ * 3. ROI Checl	e mask op Address : M data wh the optio as ROM	10h ich mus n functio	t be se	t by user	<u>Data</u>	: 01h			ode areas	s to be se	et for	appropri	ate
		OFS regis				OFS	2 regis	ter			ID code	e area	as	
C A U T I O N: Note 1: ROM order of this product programs the Data Flash area. Note 2: ROM data confirmation request ROM programming will be processed based on the mask file generated by the mask file generating utility. Only in case when ROM data programmed in the actual mass produced product differs from that of above mentioned mask file, RENESAS takes the responsibility. There is no Engineering Sample, thus please confirm the ROM data at the receipt of the Initial product delivery. Should you find any problem, please return immediately. 2 weeks without technical error feedback towards RENESAS will automatically be regarded as acceptance of products. Note 3: Mark specification														
		3 : Mark s _l Please ref	out mark	specific	ation.			34CNyyy XXXX	VVV		/I numbe ot numbe			

Fig. 1