**Product Discontinuation Notification**

**PDN-2017-005-01**

**IDT Europe GmbH**

**Registered Office:**
Grenzstrasse 28
01109 Dresden / GERMANY

**Postal Address:**
IDT Europe GmbH
Postfach 80 01 34
01101 Dresden
GERMANY

**General Manager:**
Frank Schulze

**Account Relationship:**
Bank of America – for EUR payments
Bank Code: 500 109 00
Account number: 207 250 15
BIC: BOFADEFXXXX
IBAN: DE84 5001 0900 0020 7250 15

**Value Added Tax Identification Number:**
DE151798300

**Tax-ID-No.:**
202/111/07597

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**SUBJECT OF DISCONTINUATION / TITLE**
Product Family End of Life

**FAMILY / PRODUCTS AFFECTED**
ZLED* and ZSLS*

**MANUFACTURING LOCATION / PRODUCTION LINE**
IDT Europe GmbH

**REASON FOR DISCONTINUATION**
Product Families ZLED and ZSLS will reach End of Life on date specified below.

**ALTERNATIVE ZMDI PRODUCT**
None

**EXPECTED LAST ORDER DATE**
30th June 2017

**EXPECTED LAST SHIPMENT DATE**
30th September 2017

**EXPECTED FIRST SHIPMENT DATE**
N/A

**PART NUMBER AFFECTED**

<table>
<thead>
<tr>
<th>Part Number</th>
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<tbody>
<tr>
<td>ZLED7000; ZLED7001; ZLED7002; ZLED7003; ZLED7004</td>
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<td>ZLED7005; ZLED7010; ZLED7011; ZLED7012; ZLED7015</td>
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<td>ZLED7720; ZLED7730</td>
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<tr>
<td>ZSLS7011; ZSLS7025; ZSLS7031; ZSLS7032</td>
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**ISSUED BY**
Uwe Guenther, GM Industrial
Name, Department

Signature

May 12th, 2017
Date

This document is an attachment to/Dieses Dokument ist eine Anlage zu **PR-035, Product and Process Changes (Änderungen von Produkten und Prozessen)**.
Dear Customer,

Your feedback is appreciated and will help us to realize this discontinuation without problems. Please complete this form and send it back until June 15th, 2017 (response time according to JESD 46B – 30 days).

If we receive no response concerning this PDN, we are supposing your agreement with this change and schedule.

Thank you for your help. Please tick and comment.

PDN DECISION

☐ This Product / Process Discontinuation was accepted

☐ This Product / Process Discontinuation was not accepted

Reason for Rejection:

DOCUMENTS SENT FROM

<table>
<thead>
<tr>
<th>DATE</th>
<th>CUSTOMER CONTACT NAME</th>
<th>SIGNATURE</th>
<th>COMPANY STAMP</th>
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<thead>
<tr>
<th>ADDRESS</th>
<th>CUSTOMER PHONE NO</th>
<th>CUSTOMER E-MAIL ADDRESS</th>
<th>CUSTOMER FAX NO</th>
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