

VERIFICATION OF COMPLIANCE

This Verification of Compliance is hereby issued to the below named company. The test results of this report relate only to the tested sample identified in this report.

Technical Standard: FCC 47 CFR PART 15 SUBPART B AND ANSI C63.4 (2003) IC ICES-003

General Information

Applicant:

Danube Enterprise Co., Ltd.

A2, No.255, Fengren Rd., Renwu Dist., Kaohsiung City 81452,

Taiwan

Manufacturer:

Danube Enterprise Co., Ltd.

A2, No.255, Fengren Rd., Renwu Dist., Kaohsiung City 81452,

Taiwan

Product Description

EUT Description:

DC-DC Converter

Model Number:

KHWS SERIES

Brand Name:

DANUBE

Laboratory Name:

Compliance Certification Services Inc. (Tainan Lab.)

No.8, Jiucengling, Xinhua Dist., Tainan City 712, Taiwan (R.O.C.)

Tel: +886-6-5802201 / Fax: +886-6-5802202

This device has been shown to be in compliance with and was tested in accordance with the measurement procedures specified in the Standards & Specifications listed above and as indicated in the measurement report number: T120330N01-D

Jeter Wu / Assistant Manager

Tainan Lab.

Date: April 27, 2012





Declaration of Conformity Documentation

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| * Type of Product | : DC-DC Converter |
|-------------------|-------------------|
| * Model Number | : KHWS SERIES |

* Brand Name : DANUBE

* Report Number : T120330N01-D

is herewith confirmed to comply with the requirements of FCC Part 15 Rules. Operation is subject to the following two conditions:

- (1) This device may not cause harmful interference, and
- (2) This device must accept any interference received, including interference that may cause undesired operation.

The result of electromagnetic emission has been evaluated by Compliance Certification Services Inc. EMC laboratory (TAF Lab. Code: 1109) and showed in the test report.

It is understood that each unit marketed is identical to the device as tested, and any changes to the device which could adversely affect the emission characteristics will require retest.

The following importer / manufacturer is responsible for this declaration :

| Company Name | : | | |
|---------------------|---------------------|------------------|--|
| Company Address | : | | |
| Telephone | : | Facimile : | |
| Name (Full name) | | Position : | |
| Person is responsib | ole for making this | s declaration : | |
| Name (Full nar | ne) | Position / Title | |
| Legal Signatu | ıre | Date | |