Certificate of Volatility						
Model:	Part Number:		Manufacturer: Stanford Research Systems			
SIM910			Street Address: 1290-D Reamwood Ave			
		City	: Sunnyvale	State: CA	Zip: 94089	
Vo			Memory			
Does the item contain volatile memory (i.e., memory whose contents are lost when power is removed)?  ☑ Yes ☐ No						
	provide the following	g information for e	ach type (use additional sheets if required):			
Type (SRAM, DRAM, etc.):	Size:	User	Function:		Process to Clear:	
SRAM	304 bytes	Modifiable: ⊠ Yes □ No	Firmware general variab storage and user communications data but		Turn off power	
Type (SRAM, DRAM, etc.):	Size:	User Modifiable: ☐ Yes ☐ No			Process to Clear:	
Type (SRAM, DRAM, etc.):	Size:	User Modifiable: ☐ Yes ☐ No			Process to Clear:	
Non-Volatile Memory						
Does the item contain non-volatile memory (i.e., memory whose contents are retained when power is removed)?  Yes  \text{No}  \text{No}						
If the answer is 'Yes', please provide the following information for each type (use additional sheets if required):						
Type (NVRAM, Flash, EEPF	· ·	User	Function:	Process to		
etc.): OTP PROM	7744 bytes	Modifiable: ☐ Yes	Firmware program stora		component from ard (destructive to	
OII I KOM	bytes	⊠ No		product)	aru (uestructive to	
Type (NVRAM, Flash, EEPF		User	Function:	Process to		
etc.): EEPROM	256	Modifiable:	Configuration memory a overload status bit setting	nd Remote co	ommand sequence "STOL 0"	
LEFKONI	bytes		overtoau status bit setting	g KSI,	SIOLU	
Type (NVRAM, Flash, EEPF	ROM, Size:	User	Function:	Process to	Clear:	
etc.):		Modifiable:				
		☐ Yes ☐ No				
Media						
Does the item contain media storage capability (i.e., removable or non-removable disk drives, CD/DVD drives, memory cards, etc.)?  Yes No						
If the answer is 'Yes', please provide the following information for each type (use additional sheets if required):						
Type (Disk, Card, etc.):	Size:	User	Function:	Process to	Clear:	
Removable:		Modifiable: ☐ Yes				
☐ Yes ☐ No		□ No				
Type (Disk, Card, etc.):	Size:	User	Function:	Process to	Clear:	
Removable:		Modifiable: ☐ Yes				
Yes No						
Type (Disk, Card, etc.):	Size:	User	Function:	Process to	Clear:	
D bl		Modifiable:				
Removable:		☐ Yes☐ No				
Additional Information:						
Vendor Representative Information						
Name:	Title:		Office Phone:	Fax/Emai		
Janie Du	Sales		408-744-9040	janied(a)tl	ninkSRS.com	