

# COMMON MODE CHOKE

## Design Input Form

### Contact Information

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First Name \*

Last Name \*

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Company Name \*

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Street Address

City

State

Zip

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Email \*

Phone Number \*

### Product Information

(Amps rms)	(Amps rms)	(Volts rms)
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AC Current \*

DC Current \*

Voltage

(Hz)	(Hz)	(uH)	(uH)
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Line Frequency

EMI Frequency Range

Inductance

Leakage Inductance

	Vac	Vdc	(seconds)
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HIPOT

Duration

Mounting    Thru-Hole    Surface Mount  
(select one)    Bracket    Other

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Required Finished Dimensions

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Quantities to Quote

Additional Comments/Information:
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inquirybw@butlerwinding.com

**Please submit all Spec and/or Diagram drawings with this form to:**  
inquirybw@butlerwinding.com