

WELD MAP

Part/Drawing Number: _____ Revision: _____

Part Description: _____

Part S/N (if applicable): _____

Welder ID: _____

WP/WPS: _____ Revision: _____

Joint Type: _____

Filler Material P.O.: _____

Filler Material: _____

Lot Number/Heat Number: _____

Date Welded: _____