No : Calibrator : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Equipment Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Manufacturer : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Manufacturer : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ID No. / Serial No : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ID No. / Serial No. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Due Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Calibration Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Due Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Closed Out : ACCEPTED REJECTED OTHERS

Comment (If Any ) :

QA/QC Manager, Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Disposition taken :

QC Manager, Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Action taken :

Initial : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Signature: \_\_\_\_\_\_\_\_\_\_

Description of Non-Conformance:

Initiator, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Date :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Signature \_\_\_\_\_\_\_\_\_\_\_