
	<b>GILES CHEMICAL ~ PREMIER MAGNESIA</b>		
	<b>Company Form</b>		
	Title: <b>Daily Affirmation / Lot # Verification</b>	Number: <b>P17-FM-100-059</b>	
	Owner: <b>Lisa Hefner</b>	Revision: <b>0</b>	
	Effective Date: <b>02/07/2017</b>	Page: <b>1 of 1</b>	

Lot # \_\_\_\_\_

Date \_\_\_\_\_

Check each block below at the beginning of A.M. shift change. Lead Operator, Process Operator and Quality are the only authorized signatures. By signing, you are taking full responsibility for the product. Form should be turned into Quality once Lead and Process Operators have signed off.

**Lead Operator:**

<input type="checkbox"/> Label Maker	_____	_____	_____
	Lot # Observed	Initials	Time Verified
<input type="checkbox"/> Bagger	_____	_____	_____
	Lot # Observed	Initials	Time Verified
<input type="checkbox"/> Reprocessing Bin	_____	_____	_____
	Lot # Observed	Initials	Time Verified

**Process Operator:**

<input type="checkbox"/> Label Maker	_____	_____	_____
	Lot # Observed	Initials	Time Verified
<input type="checkbox"/> Bagger	_____	_____	_____
	Lot # Observed	Initials	Time Verified
<input type="checkbox"/> Reprocessing Bin	_____	_____	_____
	Lot # Observed	Initials	Time Verified

**Quality Associate 1:**

<input type="checkbox"/> Label Maker	_____	_____	_____
	Lot # Observed	Initials	Time Verified
<input type="checkbox"/> Bagger	_____	_____	_____
	Lot # Observed	Initials	Time Verified
<input type="checkbox"/> Reprocessing Bin	_____	_____	_____
	Lot # Observed	Initials	Time Verified

**Quality Associate 2:**

<input type="checkbox"/> Label Maker	_____	_____	_____
	Lot # Observed	Initials	Time Verified
<input type="checkbox"/> Bagger	_____	_____	_____
	Lot # Observed	Initials	Time Verified
<input type="checkbox"/> Reprocessing Bin	_____	_____	_____
	Lot # Observed	Initials	Time Verified

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