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|--|------------------------------------|-------------------------------|---|
|  | GILES CHEMICAL ~ PREMIER MAGNESIA  |                               |  |
|  | Change Over                        |                               |   |
|  | Title: <b>Rite Aid Lavender 3#</b> | Number: <b>R12-CO-100-036</b> |   |
|  | Owner: <b>Ron Hall</b>             | Revision: <b>0</b>            |   |
|  | Effective Date: <b>06/01/12</b>    | Page: <b>1 of 1</b>           |   |

# CHANGE OVER SHEET

**Product: *RITE AID LAVENDER 3#***

Check each block below as the line is prepared for the run. Lead Operator also Supervisor and/or Quality are the only authorized signatures. By signing; you are taking full responsibility for the product. After the order is complete turn the change over sheet to your supervisor.

● **Line cleared of all prior product components and fragrance**

**Pouch Specifications:**

- Pouch is lavender, white, blue, red, and clear **CPU#: 0 11822 37234 3 Item #0370234**

**Pouch Machine Recipe:**

- Add aspertate mix in the ribbon blender to feed in pouch with fragrance. **Set ribbon feeder at 800**
- 6.81 grams of fragrance per pouch. (0.50%)
- 20.40 grams for the three shot weight test.
- blue plastic barrel from **ARYLESSENCE** in Marietta, GA label says **SOOTHING LAVENDER**

**Case Specification:**

- Case is brown corrugated with purple print

**Packing Specification:**

- 6 ct. pouches / case , packed horizontally into case
- Quantity of Pallets: \_\_\_\_\_
- Date Code on Pouches: \_\_\_\_\_
- Date Code on Boxes: \_\_\_\_\_
- **1<sup>st</sup> Barrel Weight: BEG.**\_\_\_\_\_ **LB END**\_\_\_\_\_ **LB Barrel #**\_\_\_\_\_
- **2<sup>nd</sup> Barrel Weight: BEG.**\_\_\_\_\_ **LB END**\_\_\_\_\_ **LB Barrel #**\_\_\_\_\_
- **3<sup>rd</sup> Barrel Weight: BEG.**\_\_\_\_\_ **LB END**\_\_\_\_\_ **LB Barrel #**\_\_\_\_\_
- **4<sup>th</sup> Barrel Weight: BEG.**\_\_\_\_\_ **LB END**\_\_\_\_\_ **LB Barrel #**\_\_\_\_\_

**Pallet Configuration:**

- 16cases per layer, column stacked6 high=96 cases per pallet

Operator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Quality Signature: \_\_\_\_\_ Date: \_\_\_\_\_