
	GILES CHEMICAL ~ PREMIER MAGNESIA		
	Company FORM		
	Title: Daily Clean Up for Carton Lines	Number: R12-PR-100-F019	
	Owner: Lee Cagle	Revision: 02	
	Effective Date: 06/19/14	Page: 1 of 1	

Carton Line Cleaning Log

Carton lines are cleaned according to the *Repackaging Cleaning Procedure (R13-PR-100-034)*.

Check each block below as the line is being cleaned. Lead Operator must verify that the line is clean before signing. By signing; you are verifying that the line is clean and ready for use. After cleaning is complete turn the sign off sheet in to your supervisor.

Carton Machine #1 <input type="checkbox"/>	Carton Machine #2 <input type="checkbox"/>
Shift #1 <input type="checkbox"/>	Shift #2 <input type="checkbox"/>
	Shift #3 <input type="checkbox"/>

Non-critical Contact Points:

- ☐ Cleaned out all bad cartons from magazine area.
- ☐ Sprayed down carton magazine, mandrels, chain conveyor and bed with water hose.
- ☐ Wiped down all sheet metal with a damp rag.
- ☐ Used compressed air to blow off the Alpha Check Weigher and then wiped it down with a damp rag.
- ☐ Cleaned up all nonconforming pouches and disposed of salt following the *Rework and Reprocessing of Salt* procedure (*R12-PR-100-007*).
- ☐ Swept the area around the machine to clean up all debris.

Critical Contact Points:

- ☐ Ensured the AMS filler was empty.
- ☐ Removed fill funnel, small auger and collar. Washed each with diluted Dawn detergent, rinsed with hot water and sprayed with Isopropyl alcohol.
- ☐ Cleaned storage container with diluted Dawn detergent, rinsed with hot water and sprayed with Isopropyl alcohol.
- ☐ Put funnel into clean storage container.
- ☐ Blew out Hopper #4 with compressed air and sprayed it with Isopropyl alcohol while it was empty.
- ☐ Posted correct ID sign (RED-Not Clean, GREEN-Cleaned for USP, and BLUE-Cleaned for Tech Grade) stating the condition of the machine.

Comments:

Operator Signature: _____ Date: _____

- ☐ I hereby verify that this line is clean, has the correct ID sign posted and is ready for use

Supervisor Signature: _____ Date: _____

Reviewed By: QA Initials: _____ Date: _____

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**GILES CHEMICAL ~ PREMIER MAGNESIA****Company Procedure**Title: **Repackaging Daily Downtime Report** Number: **R13-FM-100-042**Owner: **Monte Plott**Revision: **02**Effective Date: **04/24/17**Page: **1 of 1****REPACKAGING DAILY DOWN TIME REPORT**

PLEASE FILL IN	
Date:	<p>This is a Daily Log for the machine; this log is meant for documenting issues occurring on the machine during a shift</p> <p>For example, if scales were one of the top three issues, please note this on the appropriate line (and you should be scanning appropriately in Vorne) and explain what happened with the scales, what work has been attempted on the scales and how they were working at the change of shift</p> <p>If there were no issues, the Notes for the Day section still needs to be filled out with any sort of communication helpful to the on-coming crew...example, "will be finishing up Product X an hour into the next shift...expect a changeover"</p>
Lot #:	
Line#:	
Operator:	
Process/Mechanical Issues	Daily Issues (if no issues, use N/A)
Gripper Arms	
Combi	
Scales	
Seal bars/pouch seals	
Date Coder	
Labeler	
Other	
Notes for the Day: <i>(anything that needs to be communicated to the on-coming shift about the machine or product)</i>	

(Please use the back of this document if more space is needed for further documentation)

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**GILES CHEMICAL ~ PREMIER MAGNESIA****Company Form**Title: **Expiry Date Sign Off**Number: **R12-FM-100-009**Owner: **Brook Vaughn**Revision: **05**Effective Date: **10/25/16**Page: **1 of 2****EXPIRY DATE / SIGN OFF SHEET**

1. Circle the time that applies on each line (AM or PM).
2. Each line employee must review expiration dates and confirm their review by initialing in space provided.
3. "N/A" each unused space; no blank spaces are allowed.
4. Line operator will confirm that pouch or carton is sealed properly and place a \checkmark in the space provided.

OPERATOR _____ DATE _____ MACHINE# _____ START-UP TIME: _____

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (\checkmark)**6:00AM or 6:00PM**

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (\checkmark)**7:00AM or 7:00PM**

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (\checkmark)**8:00AM or 8:00PM**

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (\checkmark)**9:00AM or 9:00PM**

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (\checkmark)**10:00AM or 10:00PM**

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (\checkmark)**11:00AM or 11:00PM**

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (\checkmark)**Controlled Document**

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**GILES CHEMICAL ~ PREMIER MAGNESIA****Company Form**Title: **Expiry Date Sign Off**Number: **R12-FM-100-009**Owner: **Brook Vaughn**Revision: **05**Effective Date: **10/25/16**Page: **2 of 2****12:00PM or 12:00AM**

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

1:00PM or 1:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

2:00PM or 2:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

3:00PM or 3:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

4:00PM or 4:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

5:00PM or 5:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

6:00PM or 6:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

Reviewed by Production: _____**Reviewed by QA:** _____**Controlled Document**

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