

**GILES CHEMICAL ~ PREMIER MAGNESIA****Company Procedure**Title: **White Mountain 4#**Number: **R12-CO-100-008**Owner: **Monte Plott**Revision: **06**Effective Date: **10/05/2016**Page: **1 of 1**

Date: _____

Operator: _____

Line: _____

Product: White Mountain 4# Pouch [KMART (YES or NO)]

Check each block below as the line is prepared for the run. Lead Operator also Supervisor and/or Quality are the only authorized signature. By signing; you are taking full responsibility for the product. Form should be turned into the Production Supervisor at the end of the shift or end of the product run.

Line Clearance:

- ☐ Pouches or Cartons Removed ☐ Corrugated Materials Removed ☐ Labels Removed
☐ Pack and Stack Area Cleared ☐ All Paperwork Turned In

Pouch Specifications:

- ☐ Pouch is blue, white, green and black
☐ CPU#: **0 76275 09100 5**
☐ Dimensions of pouch: 11"H x 7 1/4"W x 3" Bottom Gusset

Case Specification:

- ☐ Case is brown corrugated with black print
☐ Case has MAGNESIUM SULFATE U.S.P.; EPSOM SALT
☐ Case dimensions: 5 5/8"H x 16 3/4"W x 11 1/8"D
☐ *Kmart orders require a light blue label with White Mountain EPSOM SALT 4lb; 4lb Pouch; 6pk; Barcode 20076275091009

Packing Specification:

- ☐ 6 ct. pouches / case, packed horizontally into case; 378 pouches per full pallet.
☐ Quantity of Pallets: _____
☐ Date Code on Pouch: _____ YYJJ EXP MMY
☐ Date Code on Box: _____ YYJJ EXP MMY WM 4LB

Pallet Configuration:

- ☐ 9 cases per layer, column stacked 7 high = 63 cases per pallet
☐ *Kmart orders require a 8 1/2" x 11 sign stating KMART WHITE MOUNTAIN 4# POUCH

Carton and Pouch Waste:

- ☐ Starting Inventory Balance: _____
☐ Total Used in Production: _____
☐ Pallet Markers: _____
☐ Ending Inventory Balance: _____
☐ Number of cases not making up a full pallet: _____
☐ Number of containers not making a full case: _____

Operator Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Quality Signature: _____ Date: _____

Scale Information Breakdown:

Reject: _____

Over: _____

Average: _____

Std. Dev.: _____

Max: _____

Min: _____

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