

**GILES CHEMICAL ~ PREMIER MAGNESIA****Company Procedure**Title: **Walgreen 1# Pouch**Number: **R14-CO-100-151**Owner: **Monte Plott**Revision: **03**Effective Date: **10/24/2016**Page: **1 of 1**

Date: _____

Operator: _____

Line: _____

Product: Walgreen 1# Pouch

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 day 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, red and white
☐ CPU#: **3 11917 16319 2 Above Barcode ITEM 329059**
☐ Dimensions of pouch: 8 1/2"H x 5 1/4"W x 2 1/2" Bottom Gusset

Case Specification:

- ☐ Case is brown corrugated with black print
☐ Case has Epsom Salt USP; 12x1lb
☐ Case dimensions: 7"H x 15"W x 7"D
☐ Requires a 4x2 label on one side of each case. Label should include WIC 329059, Walgreen 1# Pouch; Barcode 10311917163199. Below the barcode - 311917163192

Packing Specification:

- ☐ 12 ct. pouches / case, packed horizontally into case
☐ Quantity of Pallets: _____
☐ Date Code on Pouch: _____ YJJJ EXP MMY
☐ Date Code on Box: _____ WLG 1LB _____ YJJJ EXP MMY WLG 1LB

Pallet Configuration:

- ☐ 15 cases per layer, column stacked 6 high = 90 cases per pallet; 1080 pouches per full pallet.
☐ **Product requires the use of red PECO pallets.**

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: _____

Shift One:

Operator Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Quality Signature: _____ Date: _____

Shift Two:

Operator Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Quality Signature: _____ Date: _____

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