** 4.41 # Pouch Weight Sheet Required

Date:_____

Operator:_____

Product: *Life Lavender 2kg (4.41#) Pouch*

Line:_____

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:

☐ *If this is a fragrance change; verify the line flush was completed and the fragrance is actually Lavender by smelling the first pouch. Verified by: _____*

☐ Pouches or Cartons Removed ☐ Corrugated Materials Removed ☐ Labels Removed

☐ Pack and Stack Area Cleared ☐ All Paperwork Turned In ☐ Scent Barrel Removed and Weighed

Pouch Specifications:

☐ Pouch is lavender, white and red

☐ **CPU#: 0 57800 19614 3**

☐ Dimensions of pouch: 11 3/8"H x 9"W x 3" Bottom Gusset

Pouch Machine Recipe:

☐ 10.00 grams of fragrance per pouch (0.50%)

☐ 30.00 grams for the three shot weight check.

☐ Fragrance: Arylessence Blue Barrel Soothing Lavender #AC117874

☐ 1st Barrel Weight: BEG._____LB END_____LB Barrel #_____

☐ 2nd Barrel Weight: BEG._____LB END_____LB Barrel #_____

Case Specification:

☐ Case is brown corrugated with purple print

☐ Case has SEL D'EPSOM LIFE EPSOM SALTS LAVENDER/LAVANDE

☐ Case dimensions: 6 1/4"H x 13 1/4"W x 12 1/4"D

Packing Specification:

☐ Packed horizontally into case; pouches per case = 6; pouches per pallet = 324

☐ Quantity of Pallets: _____

☐ Date Code on Pouch: _____YYJJJ

☐ Date Code on Box: _____ _____YYJJJ

Pallet Configuration:

☐ 9 cases per layer, column stacked 6 high = 54 cases per pallet

☐ Pallets must be blue Chep pallets

Carton and Pouch Waste:

☐ Starting Inventory Balance:_____ + _____ + _____ = _____

☐ Total Used in Production:_____

☐ Pallet Markers:_____

☐ Wasted Labels: _____+ _____ + _____+ _____+_____ =_____

☐ Compactor Form _____ _____ _____ _____ _____ Waste Percentage = ____

☐ Calculated Ending Inventory Balance:_____

Actual Ending Inventory: _____   Percent Accounted for:_____

Operator Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Quality Signature: _____ Date: _____