

	PREMIER MAGNESIA - GILES CHEMICAL		
	COMPANY FORM		
	Title: Vendor Reassessment Form	Page : 1 of 3	Revision : 00 Effective Date : 08/27/12
Author: Deborah Durbin		Form Number: QA-012-F07	

Date:_____

Vendor:_____

		Findings	Excellent	Acceptable	Needs Improvement	Follow-up Actions
1.	Number of complaints					
						Date to be completed:
2.	Number of quality rejections/hold events					
						Date to be completed:
3.	Number of backorders					
						Date to be completed:



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Durbin**

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4.	Number of on-time deliveries					
						Date to be completed:
5.	Were all necessary documents supplied?					
						Date to be completed:

Approvals:

Signature/Date	Title
	Purchasing
	Quality and Regulatory Affairs Manager



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