



# GILES CHEMICAL ~ PREMIER MAGNESIA

## Company Form

Title: USP pH Meter Calibration and Maintenance Log

Number: L12-PR-100-F015

Owner: Hunter Douglas

Revision: 02

Effective Date: 07/20/2015

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Date	Cal Buffer 1 Value	Cal Buffer 2 Value	Cal Buffer 3 Value	Slope	Pass/Fail	Buffer Check 1 Value	Buffer Check 2 Value	Buffer Check 3 Value	Pass/Fail	Weekly Maintenance	Performed By	Reviewed By
					<input type="checkbox"/> Pass <input type="checkbox"/> Fail				<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Yes <input type="checkbox"/> No		
					<input type="checkbox"/> Pass <input type="checkbox"/> Fail				<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Yes <input type="checkbox"/> No		
					<input type="checkbox"/> Pass <input type="checkbox"/> Fail				<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Yes <input type="checkbox"/> No		
					<input type="checkbox"/> Pass <input type="checkbox"/> Fail				<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Yes <input type="checkbox"/> No		
					<input type="checkbox"/> Pass <input type="checkbox"/> Fail				<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Yes <input type="checkbox"/> No		
					<input type="checkbox"/> Pass <input type="checkbox"/> Fail				<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Yes <input type="checkbox"/> No		
					<input type="checkbox"/> Pass <input type="checkbox"/> Fail				<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Yes <input type="checkbox"/> No		
					<input type="checkbox"/> Pass <input type="checkbox"/> Fail				<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Yes <input type="checkbox"/> No		
					<input type="checkbox"/> Pass <input type="checkbox"/> Fail				<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Yes <input type="checkbox"/> No		
					<input type="checkbox"/> Pass <input type="checkbox"/> Fail				<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Yes <input type="checkbox"/> No		
					<input type="checkbox"/> Pass <input type="checkbox"/> Fail				<input type="checkbox"/> Pass <input type="checkbox"/> Fail	<input type="checkbox"/> Yes <input type="checkbox"/> No		

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