

**GILES CHEMICAL ~ PREMIER MAGNESIA****Company Procedure**Title: **San Francisco Bath 20#**Number: **R14-CO-100-145**Owner: **Monte Plott**Revision: **06**Effective Date: **05/01/17**Page: **1 of 1*******Requires different Date Code**

Date: _____

Operator: _____

Line: _____

Product: San Francisco Bath 20# Pouch

Check each block below as the line is prepared for the run. Lead Operator, 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 aqua green, light purple, and clear.
☐ Pouch is marked with EPSOAK and has the barcode (X000ESWGG5).
☐ Dimensions of pouch: 13.0" wide 17.5" High and 5.0" Gusset

Case Specification:

- ☐ Case is brown corrugated with black print
☐ Case dimensions: 6"H x 18"W x 12"D

Packing Specification:

- ☐ **EACH POUCH MUST BE PACKED WITHIN A CLEAR SEALED OUTER POUCH.**
☐ 2 ct. pouches / case, packed side by side into case; 70 pouches per full pallet. DO NOT STACK ON TOP OF EACH OTHER
☐ Quantity of Pallets: _____
☐ Date Code on Pouch: _____ **YYJJ EXP MMYYYY**
☐ Date Code on Box: _____ **YYJJ EXP MMYYYY SFB20**
☐ **Case requires a preprinted case label provided by Supervisor.**

Pallet Configuration:

- ☐ 7 cases per layer, column stacked 5 high = 35 cases per pallet

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: _____

Scale Information Breakdown:

Reject: _____

Over: _____

Average: _____

Std. Dev.: _____

Max: _____

Min: _____

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