
	<b>GILES CHEMICAL ~ PREMIER MAGNESIA</b>		
	<b>Company Procedure</b>		
	Title: <b>Returned Products Report</b>	Number: <b>Q12-PR-100-F011a</b>	
	Owner: <b>Lee Cagle</b>	Revision: <b>0</b>	
	Effective Date: <b>05/05/2013</b>	Page: <b>1 of 1</b>	

Returned Product Report #:

**The following must be filled out by the Return Initiator.**

Product:
Lot Number:
Mfg. Date:
Customer:
Amount Returned:
Reason Returned:
Date Return Received:

**The following must be filled out by the Quality Unit.**

Location Return Quarantined:	
Reason for Return:	
Complaint Initiated: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, Complaint Number:
CAPA Assigned: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, CAPA Number:
Recall Warranted: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Final Disposition:	
Disposition Date:	

Report Information Reviewed by Quality Unit:

Name: \_\_\_\_\_  
Date: \_\_\_\_\_  
Title: \_\_\_\_\_  
Signature: \_\_\_\_\_

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