

**GILES CHEMICAL ~ PREMIER MAGNESIA****Company Procedure**Title: **Rite Aid 6#**Number: **R12-CO-100-016**Owner: **Monte Plott**Revision: **08**Effective Date: **06/21/18**Page: **1 of 1**

Date: \_\_\_\_\_

Operator: \_\_\_\_\_

Line: \_\_\_\_\_

**Product: Rite Aid 6# Pouch**

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:**

- ☐ Pouches or Cartons Removed    ☐ Corrugated Materials Removed    ☐ Labels Removed  
☐ Pack and Stack Area Cleared    ☐ All Paperwork Turned In

**Pouch Specifications:**

- ☐ Pouch is blue, red, white and light blue  
☐ CPU#: **0 11822 03709 9 Above Barcode PLD-8331F**  
☐ Dimensions of pouch: 12 1/4"H x 9 5/8"W x 3" Bottom Gusset

**Case Specification:**

- ☐ Case is brown corrugated with black print  
☐ Case has 6 EACH; RITE AID EPSOM SALT POUCH 6LB; ITEM# 0370009; Barcode 1 00 11822 03709 6  
☐ Case dimensions: 7 1/2"H x 19 3/8"W x 9 1/4"D

**Packing Specification:**

- ☐ 6 ct. pouches / case, packed horizontally into case; 300 pouches per full pallet.  
☐ Quantity of Pallets: \_\_\_\_\_  
☐ Date Code on Pouch: \_\_\_\_\_ YYJJ EXP MMY  
☐ Date Code on Box: \_\_\_\_\_ YYJJ EXP MMY

**Pallet Configuration:**

- ☐ 10 cases per layer, column stacked 5 high = 50 cases per pallet  
☐ Product require a red PECO 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: \_\_\_\_\_

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