

**GILES CHEMICAL ~ PREMIER MAGNESIA****Company Procedure**Title: **Smart Sense 1# Carton**Number: **R13-CO-100-132**Owner: **Monte Plott**Revision: **05**Effective Date: **05/26/17**Page: **1 of 1**

Date: _____

Operator: _____

Line: _____

Product: Smart Sense 1# Carton

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 day 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

Carton Specifications:

- ☐ Carton is white with blue and black writing.
☐ CPU#: **8 83967 38804 2**
☐ Dimensions of carton: 5 1/4"H x 2 3/4"W x 2 3/4"D

Case Specification:

- ☐ Case is brown corrugated with red print
☐ Case has Epsom Salt; 12 – 1lb Cartons
☐ Case dimensions: 6"H x 10 1/4"W x 8 3/4"D
☐ One 2x4 label attached to one side of the shipper. Label should include UPC#10883967388049

Packing Specification:

- ☐ 12 ct. cartons / case, packed horizontally into case ; 1,200 cartons per full pallet
☐ Quantity of Pallets: _____
☐ Date Code on Carton: _____ YJJJ EXP MMY
☐ Date Code on Box: _____ YJJJ EXP MMY SS 1LB

Pallet Configuration:

- ☐ 20 cases per layer, column stacked 5 high = 100 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: _____

Shift One:

Operator Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Quality Signature: _____ Date: _____

Shift Two:

Operator Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Quality Signature: _____ Date: _____

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