

**GILES CHEMICAL ~ PREMIER MAGNESIA****Company Procedure**

Title: **Dr. Teal's Cold and Allergy 22oz Jar** Number: **R14-CO-100-138**
Owner: **Lee Cagle** Revision: **01**
Effective Date: **08/01/2014** Page: **1 of 1**



Date: _____

Operator: _____

Product: Dr. Teal's Cold and Allergy 22oz Jar 04190-4PK

Line: _____

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:

- ☐ *If this is a product change; verify the ribbon blender was cleaned and the fragrance is actually Cold and Allergy by smelling the first jar. Verified by: _____*
- ☐ Jars Removed ☐ Corrugated Materials Removed ☐ Labels Removed
- ☐ Pack and Stack Area Cleared ☐ All Paperwork Turned In ☐ Fragrance Buckets Removed

Jar Specifications:

- ☐ Jar is navy, white, teal, blue and black; Lid is black with white internal seal
- ☐ CPU#: **8 11068 01190 3**
- ☐ Dimensions of Jar: 7 3/4"H x 2 13/16"D; Lid has a diameter of 2 13/16"

Jar Machine Recipe:

- ☐ Fragrance: Pre-mixed in 1 green bucket with lot number to be added to 1,000 lb. Super Sack in ribbon blender.

Fragrance Lot Numbers

Case Specification:

- ☐ Case is brown corrugated with black print
- ☐ Case has Dr Teal's Epsom Salt Soaking Solution; 4- Net Wt. 1.375 lb. Jars
- ☐ Requires a printed 4x2 label on one side of each case or for the label to be printed on by a VideoJet. Label should include ID# 04190-4PK, Lot# YYJJJ and UPC# 10811068011900
- ☐ Case dimensions: 8 1/4"H x 6"W x 6"D

Packing Specification:

- ☐ 4 ct. jars / case, packed vertically into case
- ☐ Quantity of Pallets: _____
- ☐ Date Code on Jar: _____ YYJJJ
- ☐ Date Code on Box: _____ Label or Printed on barcode

Pallet Configuration:

- ☐ 42 cases per layer, column stacked 5 high = 210 cases per pallet

Jar Waste:

- ☐ Starting Inventory Balance: _____
- ☐ Total Used in Production: _____
- ☐ Pallet Markers: _____
- ☐ Ending Inventory Balance: _____
- ☐ Number of cases not making up a full pallet: _____
- ☐ Number of containers not making a full case: _____

Operator Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Quality Signature: _____ Date: _____

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