

**GILES CHEMICAL ~ PREMIER MAGNESIA****Company Form**Title: **Expiry Date Sign Off**Number: **R12-FM-100-009**Owner: **Brook Vaughn**Revision: **05**Effective Date: **10/25/16**Page: **1 of 2****EXPIRY DATE / SIGN OFF SHEET**

1. Circle the time that applies on each line (AM or PM).
2. Each line employee must review expiration dates and confirm their review by initialing in space provided.
3. "N/A" each unused space; no blank spaces are allowed.
4. Line operator will confirm that pouch or carton is sealed properly and place a ✓ in the space provided.

OPERATOR _____ **DATE** _____ **MACHINE#** _____ **START-UP TIME:** _____

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

6:00AM or 6:00PM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

7:00AM or 7:00PM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

8:00AM or 8:00PM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

9:00AM or 9:00PM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

10:00AM or 10:00PM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

11:00AM or 11:00PM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

Controlled Document

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**GILES CHEMICAL ~ PREMIER MAGNESIA****Company Form**Title: **Expiry Date Sign Off**Number: **R12-FM-100-009**Owner: **Brook Vaughn**Revision: **05**Effective Date: **10/25/16**Page: **2 of 2****12:00PM or 12:00AM**

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

1:00PM or 1:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

2:00PM or 2:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

3:00PM or 3:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

4:00PM or 4:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

5:00PM or 5:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

6:00PM or 6:00AM

Product _____ Expiry Date (Pouch/carton): _____ Expiry Date (Case/Box): _____

Initials: _____ Properly Sealed _____ (✓)

Reviewed by Production: _____**Reviewed by QA:** _____**Controlled Document**

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