FIVE S CHECK LIST CHANGE CONTROL

SL. No	Name of Area / Dept.	Check list No	Total Nos	Page(s)	Revision Status	Date of Revision	Approved by
1	**Marketing**						
1.A							
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2	**Raw Material & Planning**						
2.A							
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3	**Production**						
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4	**Quality**						
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5	**Packing & Dispatch**						
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