Dispatch process inspection checklist

Format No.
Rev. No.
Rev. Date.

Report No._____ Report Date_____ Audit No. _____

Scope of Audit: _____

Checklist Points

1._____
2._____
3._____
4._____
5._____
6._____
7._____
8._____
9._____
10._____

Evidence	status	Root causes	Target Date

No. of Non-conformity: _____Total Open _____

Closed: (01) Sr._____ Dtd._____ (02) Sr._____ Dtd._____ (03) Sr._____ Dtd._____
(04) Sr._____ Dtd._____ (05) Sr._____ Dtd._____ (06) Sr._____ Dtd._____
(07) Sr._____ Dtd._____ (08) Sr._____ Dtd._____ (09) Sr._____ Dtd._____
(10) Sr._____ Dtd._____ (11) Sr._____ Dtd._____ (12) Sr._____ Dtd._____

Audit team Sign. Auditee Sign.