

TELEPHONE (812) 428-9100

1107 EAST LOUISIANA ST. • P.O. BOX 418 • EVANSVILLE, INDIANA 47703-0418

DATE:		
PRODUCT PROCESS CHANGE FORM		
SUPPLIER NAME:		Red Spot Product Code:
		Supplier Product Name:
DEAGON FOR CURNICOUNT		
REASON FOR SUBMISSION:		
_	ANUFACTURING LOCATION CHANGE	PROCESS
RAW MATERIAL SOURCE		STORAGE
SPECIFICATION CHANGE		OTHER SPECIFY
CHANGE IN RAW MATERIAL USED		
DECLARATION		
I affirm that all changes have been indicated above and any samples submitted are representative of the regular process.		
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Explanation/Comments:		
PRINT NAME: TITLE:		
SIGNAT		PHONE:
E-MAIL	·	
RED SPOT USE ONLY		
Request Sample: Qty: ATTN:		
	C.O.A.	
Т	DS	
S	DS	COMPLIES WITH EMD-E BANNED
S	pecification	CONTROLLED SUBSTANCES
) Other	
	APPROVED REJE	CTED OTHER
	PRINTED NAME	SIGNATURE DATE
RESEARCH		
EHS		
QUALIT	ΓΥ	
PURCH		
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