XYZ Pharmaceutical (Pvt) Ltd.				
	Title: Check List for BMR	Document Number	XY/QA/SOP/001 (Annex. I)	
Logo	inde: Check List for Divik	Revision Number	00	
		Effective Date	DD.MM.YYYY	
		Form No.	BMR /001/YYYY	
		Page No.	1 of 1	

Sr#	Check List	Remarks
1	Issuance of BMR and Label Claim is proper	
2	Standard Formula	
3	Mfg and Exp are correctly allotted	
4	Manufacturing Procedure is available	
5	Raw Material and Packing Material requisition is available	
6	Extra Material requisition is affixed	
7	Printing Record is present	
8	Line clearance is taken prior to all dispensing and manufacturing activities	
9	Inprocess Checks are present	
10	Sampling Request on each step	
11	QC Approval and COA for each step are available	
12	Yield reconciliation is available	
13	Finish Good Transfer Note	
14	Is there any deviation during the process and deviation is raised and approved	
15	All pages are available and comply to index	
16	Record submission Date	

Checked By Verified By