XYZ Pharmaceutical (Pvt) Ltd. Production Department EQUIPMENT USAGE LOG

Equipment Name.	Equipment ID:	Page No.: 1 of 1
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Date	Product Name	Batch No	Stage	Start Time	End Time	Operator	Supervisor/ Pharmacist

REVISION NO.: 00

ISSUE DATE.: DD-MM-YYYY

DOC. NO.: XYZ/PD/DOC/001