

Audit Number: 5		Opening Meeting Attendees:		
Date: April 1, 2008				
Area(s) to be audited:  Warehouse		Closing Meeting Attendees:		
Scope of audit and objectives: <i>The scope of this audit will include auditing the warehouse for the following clauses of the standard: 6.2, 7.5, 8.2, 8.3, and 8.5</i>		Standard: ISO 9001 X AS9100 Other: _____		
Auditors: <i>Lead auditor: Richard Richards Auditors: Ander Anderson, Robbie Roberts</i>				
Proposed Schedule				
Time	Process or Procedure	Team 1	Team 2	
8:00	<i>Opening meeting</i>			
8:30	<i>Auditors meeting ( doc review)</i>			
9:30	<i>7.5 Product provision</i>			
11:00	<i>8.2 Monitoring and measure.</i>			
12:00	<i>Lunch break</i>			
1:00	<i>8.3 Control of N/C material</i>			
2:00	<i>8.5 Corrective action</i>			
2:30	<i>6.2 Training</i>			
3:00	<i>Auditors meeting</i>			
4:00	<i>Closing meeting</i>			
Corrective Actions to be verified: 0094, 0103, 0110				
Primary contact: <i>Pete Peters</i>		Time and Place for closing meeting: <i>4:00 Conference room B</i>		
Additional information:				
Signature of Lead Auditor: <i>Richard Richards</i>			Date: April 1, 2008	



<b>PAGE</b> of	<b>STANDARD AUDIT IS BASED UPON:</b> AS9100
<b>AUDITOR:</b>	<b>DATE:</b>

Document Reference	Description of Audit Point	Acc / Rej	Comments	C.A.R. #
4.2.1	<p><i>Is there a procedure for Control of Documents?</i></p> <p><i>Does it cover:</i></p> <ul style="list-style-type: none"> <li>• <i>Internal documents</i></li> <li>• <i>Internal forms</i></li> <li>• <i>Documents of external origin</i></li> </ul>			
4.2.2	<p><i>Are documents reviewed &amp; approved by appropriate personnel prior to issue?</i></p> <p><i>Is there a Master list?</i></p> <ul style="list-style-type: none"> <li>• <i>How is it controlled</i></li> <li>• <i>Is it current?</i></li> </ul> <p><i>Are approved documents available at areas where they are needed?</i></p> <p><i>Are invalid or obsolete documents assured against unintended use?</i></p> <p><i>Are documents reviewed and reapproved</i></p>			



**Corrective/Preventive Action Request (CPAR)**

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CA  PA

(Check appropriate box to indicate corrective or preventive action)

Corrective Action # \_\_\_\_\_

or

Preventive Action # \_\_\_\_\_

Date: \_\_\_\_\_

	Date Due	By/Assigned to	Completed Initials & Date
Investigation			
Implementation			
Audit			
CAR closed			

Description of Issue

Investigation Finding / Root Cause