

	<b>Corrective And Preventative Action (CAPA) Assignment</b>		
	Form: QS-108-F1	CCR No. CC-21-0412	Revision: 2

**CAPA Number** (assigned by Document Control after the rest of this form is completed)

	Revision #	
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**CAPA – Title / Description**

Gummies final release testing/evaluation reoccurring Aw failures
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CAPA Source / Reference (i.e. RPT #, DEV #, INV#, etc.)	
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Event Dates

CAPA Open Date	06/21/24	CAPA Due Date	
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**CAPA– Owner (i.e. Assigned to)**

Gabriel Dominguez
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**CAPA Plan / Comments**

<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> 1. Standardized Water Activity Testing in production. <input checked="" type="checkbox"/> 2. Feasibility of loosening final aW packaging specs. <input checked="" type="checkbox"/> 3. Process adjustments downstream off transfer belt traying gummies, adding extra verification check on level/amount of gummies per tray. <input checked="" type="checkbox"/> 4. Dehydration room monitoring and standardization.
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Title / Name	Signature	Date
<b>Completed By:</b> Gummy Manager/Gabriel Dominguez		
<b>Assignment Accepted By:</b> <input checked="" type="checkbox"/> N/A if same as completed by		
<b>Approved By (Quality):</b>		