

Expired Product Inventory Adjustment Form

Date

Facility / Location

Prepared By

| # | Product Name | Product Code | Batch / Lot No. | Expiry Date | Qty | Unit | Remarks |
|---|--------------|--------------|-----------------|-------------|-----|------|---------|
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Reason / Additional Notes

Prepared By

Date: _____

Reviewed By

Date: _____

Approved By

Date: _____