

End-of-Line Packaging Audit Report

Date:

Time:

Audit Location:

Auditor Name:

Line/Area:

Product Information

Product Name:

SKU / Code:

Batch / Lot No:

Packing Materials

Material	Spec	Supplier	Observations

Audit Checklist

No.	Checkpoint	Compliant	Remarks
1	Packaging materials are clean and intact		
2	Correct labels applied		
3	Sealing quality meets standard		
4	Correct date coding		

Non-Conformances / Observations

Corrective Actions

Auditor Signature

Reviewed by

Date