

# Order Processing Checklist

Date: \_\_\_\_\_ Customer PO #: \_\_\_\_\_ VSP Sales Order # \_\_\_\_\_

## Inside Sales

	<u>Yes</u>	<u>N/A</u>	
Is ship to and bill to information correct	_____	_____	
Is the ship method and freight code correct	_____	_____	
Will there be material available to complete the order by ship date	_____	_____	
Are line items correct (style of material, thickness, size, quantity and price)	_____	_____	<i>Initials</i>
Proper salesman commission # assigned	_____	_____	_____
Credit Card Order- CC#, Name, Exp. Date documented and invoice Batch # changed	_____	_____	
Vendor information documented	_____	_____	
As required, C of C, Cure Date, PSM/ Genuine Viton stickers, etc.. sent with the order	_____	_____	
Changes to order (Price, Quantity, Shipping Date, Material etc.) communicated to customer	_____	_____	

## Torque Sheets/Label Check (Administrative Assistant/Designee)

	<u>Torque Sheets</u>			<u>Labels</u>		
	<u>Yes</u>	<u>N/A</u>	<u>Initials</u>	<u>Yes</u>	<u>NA</u>	<u>Initials</u>
Are proper torque sheets/labels attached to the order as necessary	_____	_____	_____	_____	_____	_____

## Fabricating Area (Press Cut, Hand Cut and Artios)

Quality checks performed per Work Instruction (Inspect-01)

	<u>Yes</u>	<u>N/A</u>	<u>Initials</u>		<u>Yes</u>	<u>N/A</u>	<u>Initials</u>
<b>Die Cuts</b>	_____	_____	_____	<b>Hand Cuts</b>	_____	_____	_____
<b>Artios</b>	_____	_____	_____	<b>Stock</b>	_____	_____	_____

Corrected order information changed in Profit-21 by Inside Sales Taker	<u>Yes</u>	<u>N/A</u>	
Final review of order performed, order and completed PO transferred to shipping	_____	_____	_____
<b>Shop Floor Foreman/Designee</b>			

## Shipping Area

	<u>Yes</u>	<u>N/A</u>	<u>Initials</u>
Order properly segregated prior to shipping	_____	_____	_____
Order properly packaged and secured	_____	_____	_____
Checklist attached to Purchase Order for filing	_____	_____	_____
Required documentation sent with order (MSDS, Cure Date, C of C etc...)	_____	_____	_____

## Comments

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