

EMPRESA: Plus Solutions Perú SAE

FECHA OPERACIÓN: 03.01.2022

N° REQUERIM. 0000 - 22

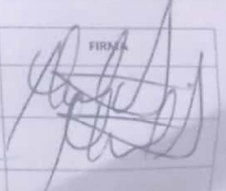
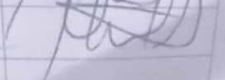
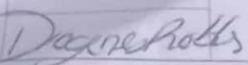
RUC: _____

TURNO: Día

LUGAR OPERACIÓN: Productores

| ITEM | DESCRIPCION DE LA OPERACIÓN | CANTIDAD ENTREGADA | | PRESENTACION | SKU | DESCRIPCION SKU | LATA | | ETIQUETA | | CLIENTE DESTINO | N° PERSONAS | HORA INICIO | | FALTANTE O DAÑADO POR SERVICE | OK |
|------|-----------------------------|--------------------|-----------|--------------|-----|-----------------|--------|-------|----------|---------------|-----------------|-------------|-------------|--------|-------------------------------|----|
| | | ENTREGADO | TRABAJADO | | | | CODIGO | FECHA | MARCA | R.S. ETIQUET. | | | INICIO | FINIAL | | |
| 1 | Apoyo Almacén | | | | | | | | | | | 01 | 06:00 | 18:00 | | |
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| 18 | | | | | | | | | | | | | | | | |

OBSERVACIONES:

| | NOMBRE | FIRMA |
|----------------------------|----------------|---|
| ASIST. ALMACEN: | Miguel Aguirce |  |
| SUPERVISOR / JEFE ALMACEN: | Miguel Aguirce |  |
| CALIDAD: | | |
| REPRESENTANTE SERVICE: | Drogeneroll's |  |