



Doc # HCT-FM-04
Issue # 01
Issue Date: 06-08-2018

Year 2021

Annual Internal OH&S Compliance Audit Schedule

Department	MONTHS OF THE YEAR 2021											
	2021											
	Jan	Feb	Mar	Aprl	May	June	July	Aug	Sept	Oct	Nov	Dec
Admin / Security / Canteen →												
Compliance/HR →												
Mechanical / Electrical →												
Accessories Store →												
Yarn →												
Knitting / Griegh →												
Chemical Store / Lab →												
Dyeing / Finishing →												
Stitching cut to pack →												



Audit Planned



Non-Conformities stated to be corrected



Nonconformities closed



Management Representative



Homecare Textiles

Audit Notice

Document Number

HCT-FM-05

Issue

01

Issue Date

01/01/2011

Date 07-DECEMBER-2021

Dear All Concerned,

It is to inform to the below mentioned department heads that an internal OHS audit will be conducted on 09-DECEMBER-2021

You are therefore requested to please update all records, documents and relevant forms related to the OHS and have them made available for review.

S. No.	Department	Date	Signature
1.	Administration/Compliance	07-12-2021	
2.	Receiving Store	07-12-2021	
3.	Yarn Godown	07-12-2021	
4.	Printing Press	07-12-2021	
5.	Electrical	07-12-2021	
6.	Mechanic	07-12-2021	
7.	Greigh	07-12-2021	
8.	Dyeing & Finishing	07-12-2021	
9.	Cut to pack	07-12-2021	
10.	Knitting	07-12-2021	
11.	Office Area	07-12-2021	
12.	Chemical Store & Lab	07-12-2021	
13.	Utility	07-12-2021	

Thank you.
Issued by

MANAGER HR / COMPLIANCE





HEMOCARE TEXTILES

INTERNAL AUDIT PLAN

Document no:HCT-FM-204

Issue no:01

Issue Date: 08-08-2014

Audit Facility Homecare Textiles**Address** D-115 SITE**Audit Date** 09-December-2021

Audit Purpose: To assess conformance and effectivity of OH&S System against internal and external standards and to highlight findings for sake of continual improvement.

Scope Homecare Textiles entire facility and supporting activities will be included in audit. The area of Interest include Standard Occupational Health and Safety, STeP & GOTS Standards and applicable OH&S policies Standard, Internal Occupational Health and Safety procedures, Local Laws and customer requirements.


Requirements: Occupational Health and Safety & STeP Standard policy, Procedure & Record work instruction act safety equipment Handling working Enviroment Personal hygine & Work place conditions etc.

Approx Time	Activity to be Assessed	Team member Involved
09:00 to 9:30	Opening Meeting	Junaid Aftab
09:30 to 09:45	Review of Pervious CAP status	Ahmed Ali
09:45 to 10:00	Audit Team meeting	All Audit Team
10:00 to 1:00	Document Review	Junaid Aftab
	Facility visit Interviews	Ahmed Ali
01:00 to 02:00	Lunch and prayer break	-
02:00 to 03:45	Ground Floor	Junaid Aftab & Ahmed Ali
	First Floor	
	2nd Floor	
	3rd Floor	
	Canteen & Pray Areas	
03:45 to 04:00	Audit team meeting and sharing findings	All Team
04:00 to 04:30	Audit report preperation	Ahmed Ali
05:00 to 05:30	Closing meeting	Junaid Aftab
05:30 to 05:45	Exit	All Team

Team Members

Team Leader:	Junaid Aftab
Auditors:	Ahmed Ali

Sign
Prepared bySign
Received by

	HEMOCARE TEXTILES	Doc # HT-FM-06
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		13-10-2018

Date: 09-12-2021

4. Required elements for OH&S (Occupational Health and Safety) management systems				REMARKS
4.1 General requirements		Y	N	
4.1-01	Are all the required elements for OHSAS 18001 included in the management system specific to the organization? <ul style="list-style-type: none"> • General requirements • OH&S policy • Planning • Implementation and operation • Checking and corrective actions • Management review 	✓		
4.1-02	Has the OH&S management system been developed for the company and officially been implemented ?	✓		
4.1-03	Is the OH&S management system maintained and continually updated ?	✓		
4.1-04	Is the design and scope of the system adapted to the size, complexity and risk potential of the organization?	✓		
4.1-05	Is the OH&S management system suitable for guaranteeing a continual improvement with regard to output in the areas of safety and health?	✓		
4.1-06	Is the basic principle of " prevention is better than damage control " firmly established and realized in the system?	✓		
4.1-07	Is the area of application of the Labour Protection management system/occupational Health & Safety management system (OH&S MS established and documented?	✓		



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	4.2 OH&S Policy	Y	N	REMARKS
4.2-01	Is an occupational health and safety policy established and implemented?	✓		
4.2-01a	The Labour Protection/ OH&S-policy is communicated to all persons, who work on behalf of the organization			✓ OH&S Policy is missing at garments notice Board.
4.2-02	Does the organization's top management sufficiently assume its role of promoter of the implementation of the occupational health and safety policy?	✓		
4.2-03	Does the OH&S-policy contain statements on the following issues:			
	<ul style="list-style-type: none">• nature and scale of the organization's OH&S risks; the OH&S management system policy must be appropriate	✓		
	<ul style="list-style-type: none">• commitment to continual improvement	✓		
	<ul style="list-style-type: none">• commitment to comply with current applicable Labour Protection laws and other requirements to which the organization subscribes	✓		
	<ul style="list-style-type: none">• documentation, implementation and maintenance of the system	✓		
	<ul style="list-style-type: none">• inclusion of all employees in the system	✓		
	<ul style="list-style-type: none">• availability to all interested parties	✓		
	<ul style="list-style-type: none">• periodical review of the OH&S management system to ensure that it remains relevant and appropriate to the organization	✓		



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	4.3 Planning	Y	N	REMARKS
	4.3.1 Planning for hazard identification, risk assessment and risk control			
4.3.1-01	Are there written procedures for the identification and assessment of hazards, and the introduction and implementation of necessary control measures ?	✓		
4.3.1-01a	The procedure to identify and assess hazards/ risks and the determination of controlled conditions are documented.	✓		
4.3.1-01b	The results of the identification and assessment of hazards/ risks as well as the determination of controlled conditions are documented.	✓		
	The " hierarchy of measures " (technical, before organizational, before personal protection measures) is an integral part in the identification and assessment of hazards/ risks .	✓		
4.3.1-02	Do these procedures include <ul style="list-style-type: none">• routine and non-routine activities;• activities of all personnel having access to the workplace (including subcontractors and visitors);• facilities at the workplace, provided by the organization or others?	✓ ✓ ✓		
4.3.1-03	Is the organization's methodology for hazard identification and risk analysis and control adapted to the following principles: <ul style="list-style-type: none">• is it adjusted to the organization's risk potential?• risk assessment method?• implementation of preventive and corrective actions?• identification of requirements placed on the facilities?• identification of need for instruction?• monitoring the introduced measures for their compliance with the schedule and effectiveness?	✓ ✓ ✓ ✓ ✓ ✓		✓ Hazard instruction is missing in chemical stores
4.3.1-04	Are the results of assessment considered when establishing the OH&S management system objectives ?	✓		
4.3.1-04a	Legal and other requirements are considered in the assessment of the hazards/ risks .	✓		



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		Y	N	REMARKS
4.3.1-05	Is information laid down in writing and updated continually?	✓		
4.3.1-06	In case of changes in the company the concerned hazard identifications and assessments are immediately adapted.	✓		
	4.3.2 Legal and other requirements			
4.3.2-01	Is there a documented procedure for identifying and accessing the relevant legal and other labour protection requirements?	✓		
4.3.2-02	Is information kept up-to-date continually?	✓		
4.3.2-03	Is relevant information communicated to the organization's employees and other interested parties ?	✓		
4.3.2-04	Is the implementation of the legal requirements continually monitored?	✓		
4.3.2-05	The " other requirements " to which the organization has committed in regard to its hazards/risks (which is e.g. self-commitments) are established and accessible.	✓		
	4.3.3 Objectives			
4.3.3-01	Are occupational health and safety objectives established and maintained for each function and on all levels within the organization?	✓		
4.3.3-01a	The objectives and targets are, insofar as practicable, measurable.	✓		
4.3.3-02	When establishing and reviewing its objectives, does the organization in particular consider <ul style="list-style-type: none">• its legal and other requirements;• its hazards and risks;• its technical options;• its financial, operational and business opportunities and requirements;• the views of interested parties?	✓		
4.3.3-03	Are the objectives consistent with the OH&S policy ?	✓		
4.3.3-04	Are the objectives consistent with the activities of continual improvement ?	✓		



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	4.3.4 Occupational Health and Safety programme(s)	Y	N	REMARKS
4.3.4-01	Are the respective actions necessary for achieving the objectives planned and documented?			✓ OHS objective exist but not found on record
4.3.4-02	Do these activities extend to all activities and to all levels of the hierarchy in the organization?	✓		
4.3.4-03	Are <ul style="list-style-type: none">• the competent persons,• the resources,• the targeted dates defined for the individual actions?	✓ ✓ ✓		
4.3.4-04	Are the programmes reviewed with regard to their modification index at regular intervals?	✓		
4.3.4-05	Are programmes up-dated if required?	✓		



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	4.4 Implementation and operation	Y	N	REMARKS
	4.4.1 Structure and responsibility			
4.4.1-01	Are all the OH&S management system relevant responsibilities and authorities <ul style="list-style-type: none">• defined;• coordinated with those concerned; in the organization?	✓		
4.4.1-02	Are all the legal requirements regarding responsible persons (representatives) defined for the implementation of the OH&S management system?	✓		
4.4.1-03	Are the "representatives" duly appointed and if required reported to the authority?	✓		
4.4.1-04	Are the " representatives " adequately qualified ?	✓		
4.4.1-05	Are the " representatives " sufficiently supported in assuming their responsibility by top management?	✓		
4.4.1-06	Are the " representatives " sufficiently active in assuming their functions?	✓		
4.4.1-07	Are the resources necessary for establishing, controlling and improving the labour protection management system provided by top management?	✓		
4.4.1-08	Has a member of top management been determined, who has also been entrusted with supreme responsibility for the OH&S management?	✓		



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	4.4.2 Training, awareness and competence	Y	N	REMARKS
4.4.2-01	Has the organization established documented procedures for training and instruction?	✓		
4.4.2-02	Does this training system cover all the organization's employees and is it adjusted to the existing risk potential ?	✓		
4.4.2-03	Does this training system also cover external persons who are active on the premises?	✓		
4.4.2-03a	Persons who work by order of the organization and from whose activities considerably hazards (may) arise, were and are identified.	✓		
4.4.2-03b	These persons are adequately trained regarding the objectives and defined operational procedures, and are sensitized for possible consequences in the case of noncompliance.	✓		
4.4.2-03c	The organization demands that the contractors can prove that they have the necessary skills or can prove that the staff they employ have the required training; the organization does this by spot checks.	✓		
4.4.2-03d	The records on qualification measures (e.g. trainings and other measures) of staff and persons, working by order of the organization are kept on file.	✓		
4.4.2-05	Are the trainings performed at the right moment: <ul style="list-style-type: none">• periodically;• after organizational and personnel changes;• in light of recent events (e.g. accidents or near-misses and recognized unsafe situations);• according to the action plans;• in case of new employees;• in case of job changes;• if case of employing external persons (e.g. temporary workers)?	✓ ✓ ✓ ✓ ✓ ✓ ✓		
4.4.2-06	Is sufficient training documentation available?	✓		
4.4.2-07	Is considerable consideration given to the employees' motivation with regard to safety and health relevant behaviour?	✓		
4.4.2-08	Do the employees have sufficient skills for the performance of their activities?	✓		



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	4.4.3 Consultation and communication	Y	N	REMARKS
4.4.3-01	Is there a documented procedure for communication within the organization and with interested parties? <ul style="list-style-type: none">• internally with employees and representatives;• externally with public authorities and other interested parties;• with contractors (external service providers);	✓		
4.4.3-01a	There is a procedure to systematically involve employees in the identification and assessment of hazards/risks of controlled conditions, in the investigation of incidents as well as in the development/revision of labour protection policy and of the objectives.	✓		
4.4.3-01b	Results of the involvement are an integral part of the review by the management (management review).	✓		
4.4.3-01c	Provided that it was decided to communicate aspects of hazards externally, a method has been introduced and realized.	✓		
4.4.3-01d	External companies have been and are adequately informed about changes of the Labour Protection/ OH&S management system.	✓		
4.4.3-02	Are " specialists " sufficiently involved in communication?	✓		
4.4.3-03	Are meetings adequately documented , and are interested parties informed ?	✓		
4.4.3-04	Are the duties to furnish information as prescribed by law fulfilled?	✓		
4.4.3-05	Is it guaranteed that employees are <ul style="list-style-type: none">• involved in the development and review of OH&S principles and procedures of risk management;• consulted in case of changes having an effect on occupational health and safety?• represented in OH&S management system issues;• informed on their representation in these issues?	✓		



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	4.4.4 Documentation	Y	N	REMARKS
4.4.4-01	Is the OH&S management system fully described in sufficient documentation and is reference made to connected documents?	✓		
4.4.4-02	Is the structure of the documentation efficient and user friendly ?	✓		
4.4.4-03	Does available documentation meet the existing legal requirements?	✓		
	4.4.5 Document and data control			
4.4.5-01	Is a documented procedure for document control established and maintained?	✓		
4.4.5-02	Does this procedure ensure that <ul style="list-style-type: none">only valid and released documents are used;the right documents are available on the right place at the right time;the documents and data are understandable for everybody	✓ ✓ ✓		
4.4.5-03	Is the modification service guaranteed?	✓		
4.4.5-04	Is it guaranteed that archived documents and data that are retained for legal reasons and/or for preserving knowledge are suitably marked and that a specified minimum retention time is adhered to?	✓		



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	4.4.6 Operational control	Y	N	REMARKS
4.4.6-01	Has the organization identified those operations and activities that are associated with identified risks where control measures need to be applied?	✓		
4.4.6-02	Are in this case <ul style="list-style-type: none">• documented procedures established and maintained where their absence could lead to a break from the labour protection policy and labour protection objectives;• operating criteria recorded;• suppliers and service providers informed about these procedures in case they are concerned;• procedures for the design of workplaces, process, installations, machinery, operating procedures and work organization , including their adaptation to human capabilities established and maintained, in order to eliminate or reduce labour protection risks at their source?	✓ ✓ ✓ ✓		
	4.4.7 Emergency preparedness and response			
4.4.7-01	Has the organization established documented procedures to identify possible incidents and emergency situations?	✓		
4.4.7-02	Was an emergency preparedness and response plans developed for an emergency situation?	✓		
4.4.7-03	Are the emergency preparedness and response plans reviewed particularly after incidents or emergencies?	✓		
4.4.7-04	Are the emergency preparedness and response plans , where practicable tested and practiced periodically, and are the findings that are obtained incorporated into the existing emergency preparedness and response plans ?	✓		
4.4.7-05	Is preventive health protection (in-house preventive medical examination) established?	✓		
4.4.7-06	Does the established preventive health protection meet the statutory requirements?	✓		



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	4.5 Checking and corrective action	Y	N	REMARKS
	4.5.1 Performance measurement and monitoring			
4.5.1-01	Does the organization establish and maintain a documented procedure to monitor and measure OH&S management system performance ?	✓		
4.5.1-02	Does this procedure provide for: <ul style="list-style-type: none">• both qualitative and quantitative measurements according to the needs of the organization?• monitoring to which extent the organization's OH&S management system objectives are met?• observe the OH&S management system program and criteria for operational sequences?• Monitoring of relevant legislation and regulations?• Monitoring of accidents, illnesses, incidents (including near-misses and unsafe situations) and other evidence of a negative OH&S management system performance?• recording of data and results of monitoring and measurements sufficient to facilitate subsequent corrective and preventive action analysis?	✓ ✓ ✓ ✓ ✓ ✓		
4.5.1-03	Is equipment needed for performance measurement?	✓		
4.5.1-04	Is this equipment monitored adequately?	✓		



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	4.5.2 Accidents, incidents, noncompliance and corrective and preventive action	Y	N	REMARKS
4.5.2-01	Is a documented procedure established and maintained in which responsibility and authority are laid down for: <ul style="list-style-type: none">the handling and investigation of accidents, near misses, unsafe situations and other non-conformities;the initiation and completion of corrective and preventive actions;confirmation of the effectiveness of corrective and preventive actions?	✓		
4.5.2-02	Are the events sufficiently analyzed , so that the true causes can be recognized?	✓		
4.5.2-03	Are all the changes of the documented procedures that result from corrective and preventive action laid down in writing ?	✓		
	4.5.2.1 Compliance with statutory and other requirements			
4.5.2.1-04	(e.g. self-commitment) is assessed internally on a regular basis.	✓		
4.5.2.1-05	Records of this/these assessment(s) are available and retained.	✓		



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	4.5.3 Records management	Y	N	REMARKS
4.5.3-01	Is it specified which records need to be maintained?	✓		
4.5.3-01a	There is a procedure for systematic and regular investigations of incidents to recognize deficits, identify corrective actions, preventive actions and the possibility for continual improvement. The results of these investigations are recorded and communicated (internally).	✓		
4.5.3-02	Are the records available as a whole so that the legal evidencing obligations can be met?	✓		
4.5.3-03	Is it specified where what records can be found and who is responsible for what record?	✓		
4.5.3-04	Are the retention times defined?	✓		
4.5.3-05	Is the availability of the records guaranteed during the retention time (integrity of data)?	✓		



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	4.5.4 Internal Audit	Y	N	REMARKS
4.5.4-01	Is a documented procedure defined for carrying out an OH&S management system audit?	✓		
4.5.4-02	Is a systematic audit preparation conducted? (planning, programme, check lists, selection of auditors,...)	✓		
4.5.4-03	Does this plan sufficiently consider the following: <ul style="list-style-type: none">• Complete audit of the overall system?• In all areas of the organization?• changes in the organization, procedures, staff?• external and internal requirements?• focussed activities?• are audits carried out in coordination with policy, the actions and the objectives and targets?• risk potential of the areas?• Incidents such as accidents, near misses or unsafe situations	✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓		
4.5.4-04	Are internal auditors available for carrying out audits? If so, <ul style="list-style-type: none">• with adequate qualification?• in sufficient number?	✓ ✓		
4.5.4-04-04a	The objectivity and impartiality of the auditors are guaranteed by the selection of auditors. Internal audits have been and are conducted in accordance with BS OHSAS 18001:2007.	✓		
4.5.4-05	Are the audit results recorded?	✓		
4.5.4-06	Are actions derived from the audit results?	✓		
4.5.4-07	Are the actions followed-up until they are completed?	✓		
4.5.4-08	Are the audit results communicated in an adequate manner?	✓		
4.5.4-09	Are the auditors sufficiently independent of the areas under audit?	✓		
4.5.4-10	Is the top management level (at least one nominated member of top management) sufficiently integrated in and informed about the internal auditing?	✓		



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	4.6 OH&S Management Systems - Management review	Y	N	REMARKS
4.6-01	Is a documented procedure established and in use for the review of the system?	✓		
4.6-02	Is the top management level integrated in the reviewing process in a suitable way?	✓		
4.6-03	Does the reviewing process consider the following items: <ul style="list-style-type: none">• The holistic review of the results of all the established objectives?• The efficiency and performance of the entire system based on key performance indicators?• The audit results?• Internal factors such as organizational changes, resources, new technologies and products?• External factors as changes in the ambient conditions, legislation and state of the art?	✓ ✓ ✓ ✓ ✓ ✓		
4.6-03a	Does the input for the review also contain in addition to the nine minimum entries: <ul style="list-style-type: none">a) Results of internal audits and reviews on compliance with statutory and other requirementsb) Results of the identification and assessment of hazards/risksc) Notification of external interested parties including complaintsd) Labour protection/ OH&S services of the organizatione) Scope of the achievement of objectivesf) Status of corrective and preventive actionsg) Status of the investigations of incidents, corrective and preventive measuresh) Follow-up actions from earlier reviews by the managementi) Changing frame work conditions including legal developmentsj) Results from the involvement of employeesk) Suggestions for improvements	✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓		
4.6-03 b	A management review according to BS OHSAS 18001-2007 was conducted.	✓		
4.6-04	Are actions and new objectives and targets derived from the review output?	✓		
4.6-05	Is the review output adequately communicated throughout the organization?	✓		



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	4.7 Facility Practices and Reports	Y	N	REMARKS
4.7-01	Has the facility implemented a workplace safety regarding cleanliness, use and state of PPE, state of working equipment and integrated safety features on machines?	✓		
4.7-02	Does the facility have documented for working environment regarding noise, dust, odours, temperature and lighting?	✓		
4.7-03	Has the facility marked signalisation and access of escape routes and fire exits?	✓		
4.7-04	Does all the functionality of emergency equipment and alarm system been checked?	✓		
4.7-05	Has the facility ensured the building structure as well as operational safety (i.e. securing of platform, elevators shafts, stairways, ladders and construction zones).	✓		

**HOMECARE TEXTILES** D-115**NON-CONFIRMITY REPORT**

Doc # HT-FM-11

Issue # 01

Issue Date:

01-09-10

Dated 09/12/2021Reporting Person Ahmed Ali Designation Manager Department ComplianceProcess — Time — Customer Name / Supplier Name Home Care TextileOther Information —

Non-Conformance Description:

During Factory visit it was noted that OHS
Policy is missing at Garments B notice Board.

Submitted To Mr. Ahsan Time — Sign Ah Sam

Root Cause:

Occupational Health & Safety Policy was
displayed at Garments B But removed during
cleaning Process at Garments B

Assigned for Action Mr. Ahsan Date & Sign Ah Sam

Action Taken:

Occupational Health & Safety Policy Pasted
on Garments B Notice Board.

Action taken by Mr. AhsanTarget Date 09/12/2021Action Result: Done on timeAction Verified by Mr. Ahmed Ali Date & Signature —

**HEMOCARE TEXTILES** D-115

Doc # HT-FM-11

Issue # 01

Issue Date:

01-09-10

NON-CONFIRMITY REPORTDated 09/12/2021Reporting Person Ahmed Ali Designation Manager Department ComplianceProcess — Time — Customer Name / Supplier Name Home Care TextileOther Information —

Non-Conformance Description:

During Factory visit it was noted that
Hazard instruction is missing in one Place.

Submitted To Mr. AhsanTime —

Sign

Ah San

Root Cause:

Due to improper Pasting Hazard instruction
was remove from chemical area.

Assigned for Action

Mr. Ahsan

Date & Sign

Ah San

Action Taken:

The Hazard instruction Proper Pasted
on Same day.

Action taken by

Mr. Ahsan

Target Date

09/12/2021

Action Result:

Done on time

Action Verified by

Mr. Ahmed Ali

Date & Signature



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Issue # 01

Issue Date:

01-09-10

NON-CONFIRMITY REPORT

Dated 09/12/2021

Reporting Person Ahmed Ali Designation Manager Department Compliance,

Process — Time — Customer Name / Supplier Name Home Care Textile,

Other Information —

Non-Conformance Description:

During documents review it was noted that OHS objective exist but not bound on records

Submitted To Mr. Ahsan

Time —

Sign

Ahsan

Root Cause:

Occupational Health & Safety objective wrongly put in another file.

Assigned for Action Mr. Ahsan

Date & Sign

Ahsan

Action Taken:

Occupational Health & Safety objective put on their records

Action taken by Mr. Ahsan

Target Date

09/12/2021

Action Result:

Done on time

Action Verified by

Ahmed Ali

Date & Signature





HOEMCARE TEXTILES D-115

Doc # HCT-FM-07
Issue # 01
Issue Date: 01-03-2022

AUDIT FINDING REPORT

ID / Clause	Department	Process / Section	Finding Details	Corrective Action To Be Done	Target Date	Responsible Person	Remarks
4.2.01 (a)	Garments	cut to pack	OH&S policy missing at notice board	OH&S policy pasted on a notice board.	09-12-2021	Mr. Ahsan.	closed
4.3.103	chemical store	chemical storage.	Hazard instruction is missing in store	Hazard instruction Pasted on line	09-12-2021	Mr. Ahsan.	closed
4.3.4.01	Compliance	Office	OH&S objective not found on a record.	objectives put wrongly in another file objective put their on record.	09-12-2021	Mr. Ahsan	closed

**HEMOCARE TEXTILES** D-115**AUDIT SUMMARY REPORT**

Doc # HT-FM-03

Issue # 01

Issue Date:

01-09-2010

Audit Date: **09-12-2021**

S. No.	Departments	NCR's		Total
		Major	Minor	
1.	Garments	00	01	01
2.	Chemical Store	00	01	01
3.	Compliance	00	01	01
TOTAL				03



Issued by