

Figure 1: Excess Cooling & Heating Energy Due to Overcooling & Overheating - CTW Envelope Only

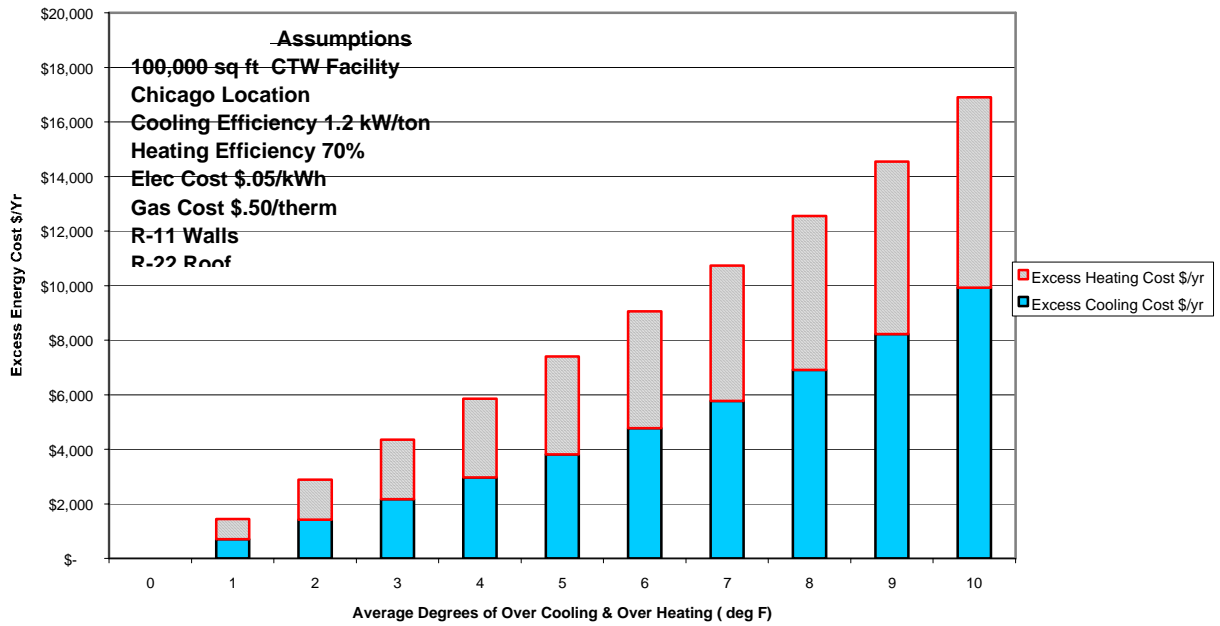
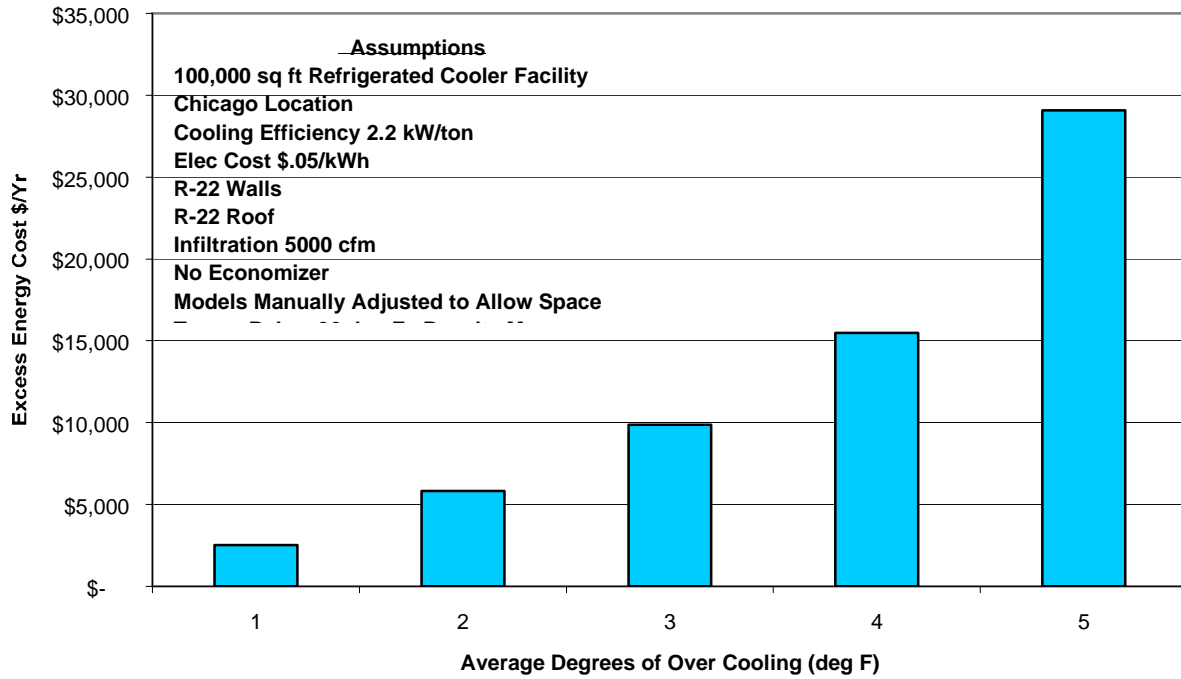
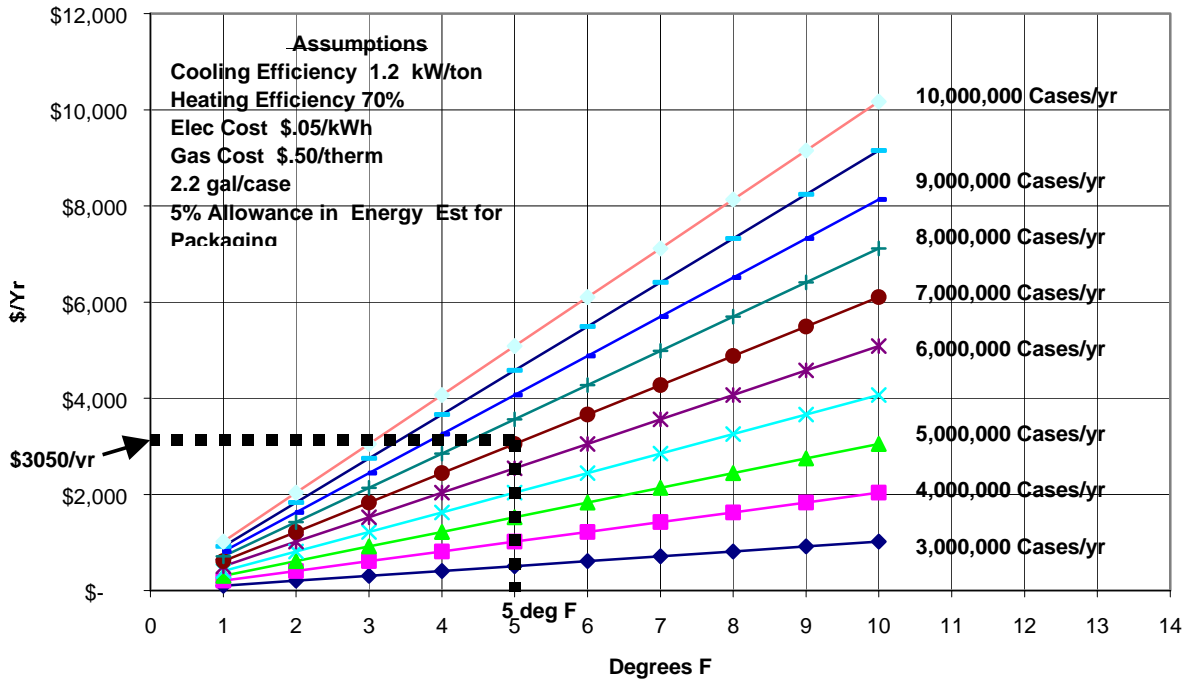


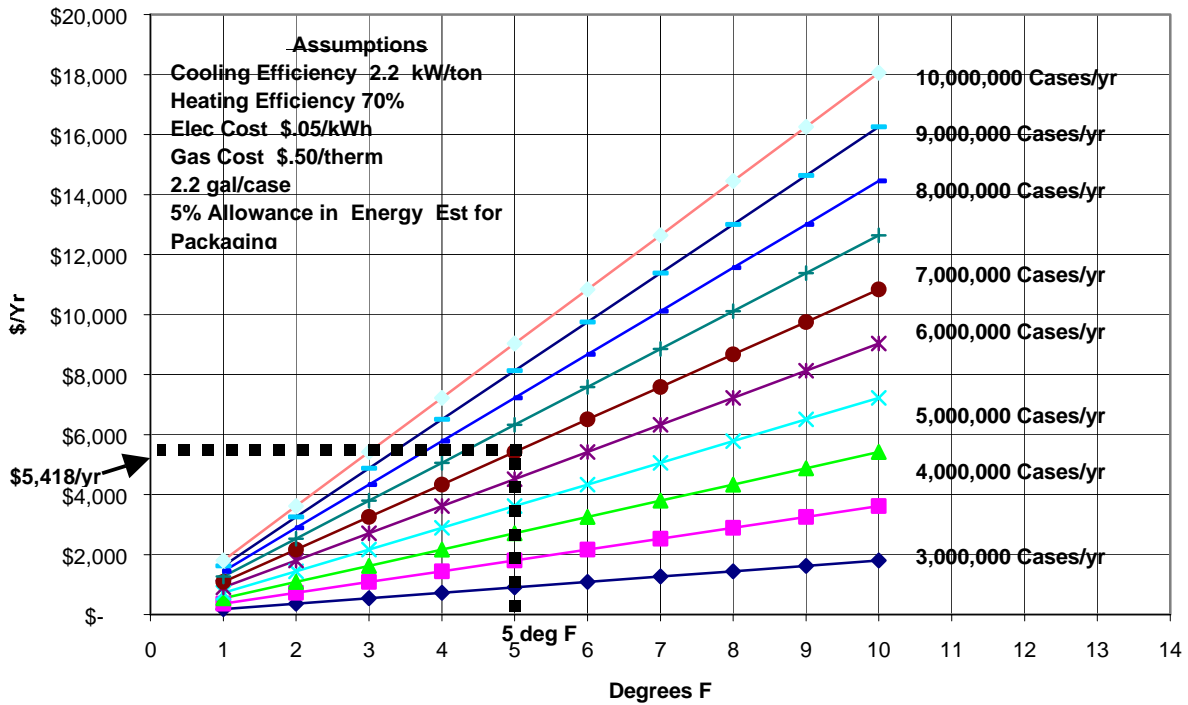
Figure 2: Excess Cooling Energy Due to Over Cooling - Cooler Envelope Only



**Figure 3: Increased Energy Costs due to Product Overcooling & Overheating
CTW Facility**



**Figure 4: Increased Energy Costs due to Product Overcooling & Overheating
Refrigerated Cooler**



MILLER BREWING COMPANY CONTROLLED TEMPERATURE WAREHOUSE REPORT

Month: August

Year: 2002

Distributor Name: XYZ Distributing, Co. Dist. #: _____

Do you have more than one warehouse associated with this distributor number? _____ (Yes) _____ (No)

If yes, choose one of the following identifiers to uniquely identify THIS warehouse: Choose #1-6 _____

IMPORTANT: Always use the same unique identifier for each Warehouse Address _____
warehouse address location every month. _____

WAREHOUSE TEMPERATURE	Temperatures Recorded					
	% of Max # of Readings for Mo.	Average	Minimum	Maximum	No. of Readings Below Min Temp	No. of Readings Over Max Temp
Temperature Sensor #1	<u>100%</u>	<u>71</u>	<u>68</u>	<u>76</u>	<u>0</u>	<u>0</u>
Temperature Sensor #2	<u>100%</u>	<u>71</u>	<u>68</u>	<u>76</u>	<u>0</u>	<u>0</u>
Temperature Sensor #3	<u>0%</u>	_____	_____	_____	_____	_____
Temperature Sensor #4	<u>0%</u>	_____	_____	_____	_____	_____
Temperature Sensor #5	<u>0%</u>	_____	_____	_____	_____	_____
Temperature Sensor #6	<u>0%</u>	_____	_____	_____	_____	_____

GRAND AVERAGE - Average Temperature of all Sensors 71

Official Weather Station Nearest this Location - from BPN City: Anytown ST: USA

Maximum Temperature Allowed 79 (for month and location) Minimum Temperature Allowed 35

Reviewed by MBCo. Employee: _____
(Print Name)

Signature of MBCo. Employee: _____ Date: _____

Name of Distributor Personnel: _____
(Print Name)

Title/Position at Distributorship: _____

Is Location Temperature Compliant? Yes

If no, what actions are being taken to address non-compliance to temperature requirements specified on Miller BPN?

I verify that the above information is true and correct. Please sign below.

Signature of Distributor Personnel: _____ Date: _____

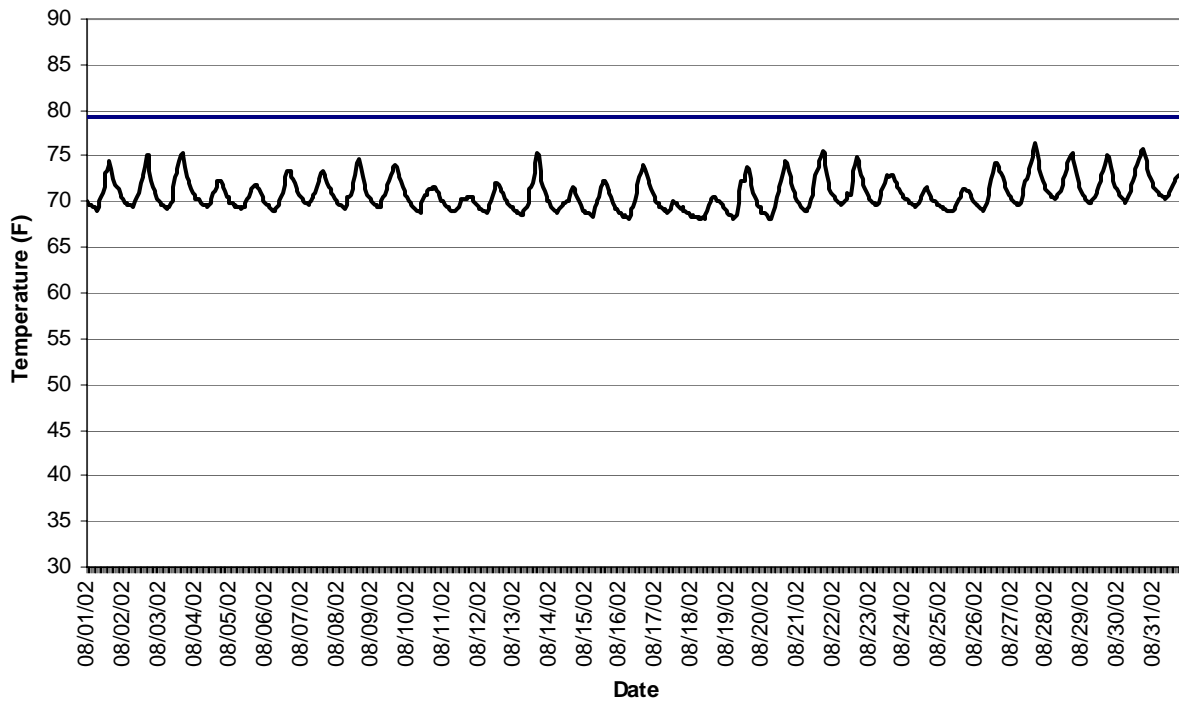
A copy of this completed form is to be retained by the distributor for a period of one (1) year; originals are to be retained by Miller Brewing Company. Raw data used to develop this report is to be retained for a minimum of three (3) months.

Temperature data is to be reviewed monthly by Miller Brewing Company Sales Department personnel with Distributor person on site at the distributor location during monthly sales planning sessions.

Comments: _____

MONTHLY TEMPERATURE REPORT

Zone 1



MONTHLY TEMPERATURE REPORT

Zone 2

