
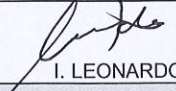
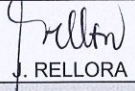
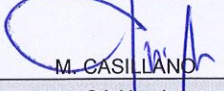
 KANEPACKAGE PHILIPPINE INC.		ABNORMALITY REPORT		Control No.	
				AR2025-03-130	
I. Item Information					
Item Code	00949347-01	Customer	SANYO DENKI		
Item Description	PRINT SPECIFICATION	Delivery Date	250321		
Inspection Date	250323	Inspection Time	3:00 PM		
Lot Quantity	986 PCS	Job Order Number	JO25-M-00641-141		
Affected Quantity	22 PCS	Origin	<input checked="" type="checkbox"/> IN-HOUSE <input type="checkbox"/> SUPPLIER:		
Rejection Rate and PPM	2.23% 22,312 PPM	Date Received	N/A		
Sampling Quantity (IQA)	N/A	Detection (Section / Area)	SCREENING 2		
Problem Description	MISALIGN PRINT	Delivery Receipt Number	N/A		
II. Visual Reference (Defect Illustration)					
GOOD			NO GOOD		
NO MISALIGN PRINT					
III. Documented Information Review (To be filled out by QA Line leader)					
Related Doc. Info.		Control Number	Requirement:	NO MISALIGN PRINT	
<input checked="" type="checkbox"/> Procedure Manual :		PM-QA-018	Actual:	WITH MISALIGN PRINT	
<input checked="" type="checkbox"/> Technical Drawing :		SDP-0852-01AB-05			
<input checked="" type="checkbox"/> Work Instruction :		WI-QA-001-010	Conclusion or Recommendation:	<input checked="" type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable	
<input checked="" type="checkbox"/> Job Order :		JO25-M-00641-141			
<input checked="" type="checkbox"/> Reports :		AR2025-03-130			
<input checked="" type="checkbox"/> Defect Limit :		SDP DEFECT LIMIT			
IV. Initial Disposition (To be filled out by ME Department If Needed)					
<input type="checkbox"/> Good <input type="checkbox"/> Conditional (Please indicate details)		<input checked="" type="checkbox"/> Rejected <input type="checkbox"/> Conditional (Please indicate details)			
<input type="checkbox"/> Rejected		<input type="checkbox"/> Backload If item is for sorting, for backload, or for rework, fill-out below,			
<input type="checkbox"/> Backload		<input type="checkbox"/> Good		Person In Charge	Target Date
		<input type="checkbox"/> For Sorting			Signature
		<input type="checkbox"/> For Rework			
Remarks:				JUDGEMENT <small>(If subject is for issuance of IRF / CAR)</small> <input type="checkbox"/> FOR 5 WHY ISSUANCE <input type="checkbox"/> FOR CAR ISSUANCE <input checked="" type="checkbox"/> FOR IRF ISSUANCE	
Detected by	Checked by	Initial Approved by (If Needed)	Approved by	Received By	
 I. LEONARDO <small>QA Inspector</small>	 J. RELLORA <small>QA Line Leader</small>		 M. CASILLANO <small>QA Head</small>		
		ME Head	QA Head	QA Staff	
Important: Backloading Policy (External Provider Rejects) <small>Rejection rate that is more than 80% of the total quantity shall be approved by Top Management before backloading.</small>		Evaluation	Approved by	Final Disposition	
		<input type="checkbox"/> <80% No Need <input type="checkbox"/> >80% Need		<input type="checkbox"/> Backload <input type="checkbox"/> Accept <input type="checkbox"/> Other _____	
			Top Management		

*Note: All details must be filled out completely.
Submit this form to Line Leader immediately after accomplishment.*

VIII. Sorting Details

Sorting Date	Sorting Time		No. of Man-power	Lot Number	Sorted Quantity	Reject Quantity	Defect Name	Sorted by
	Start	End						
	Total Sorting Hours			Total No. of Manpower	Total Sorted Quantity	Total Reject Quantity	Total Good Quantity	Rejection Rate (%)
Sorting Result								
R&R Verification								

		Reason	Total Quantity	Remarks	Received by
<input type="checkbox"/>	Pull-Out				
<input type="checkbox"/>	For Transfer				

XI. Reworking Result

Reworking Date	Reworking Time		# of Man-power	Lot Number	Reworked Quantity	Good Quantity	Reject Quantity	Rejection Rate (%)
	Start	End						
Reworked by / Department					Endorsed to / Department			

Reinspection Date	Reworking Time		# of Man-power	Lot Number	Reinspected Quantity	Good Quantity	Reject Quantity	Rejection Rate (%)
	Start	End						
Inspected by			Verified by			Approved by		
QA Inspector			QA Line Leader/Sub-Leader			QA Head		

Submit this form to Line Leader immediately after accomplishment.



Kanepackage Philippine Inc.

JOB ORDER

MEMO: SERVO MOTOR

PR-

Santiago, Jhanin
SO #: SO25-M-0

Customer: SANYO DENKI PHILS INC

ITEM CODE: 00949347-01

Netsuite Itemcode: 00949347-01

JOB ORDER:

JO25-M-00641-141



Item Description: Print Specification

QTY: 1000

DELIVERY DATE:
2025-03-21

CREATED BY:
Mendonez, Jhee Ann Manalo

DATE RELEASED:
2025-03-18

Raw Material Code:	Qty To Be Used:	Over Run:	Cut Size:	Actual Issued:	DR#:	SUPPLIER:
958X943 BF TX200	500	10	N/A	510	244442	TS

Tooling Reference #

Control/Batch #:

RM Issued By:

PROCESS / MACHINE	DATE	IN-CHARGE		GOOD QTY	TRIAL RUN		REJECTED QTY		REMARKS
		Operator	ME/QA		G	R	INHOUSE	SUPPLIER	
1. EQOS	3/21	AVEN	P. Mendonez	510	2				S-1744 E-1744
2. DIECUT S1700-2	03-21	N-J	P. Mendonez	500	1	5			S-10:46 E-10:49
3. DETACHING 1	3/23	N-J		1000	G	R			
4. GLUING SD 1800	3/23	Neth Ann Kachul		986	G	R			
5. LOT NUMBERING	3/23		Jan	980	G	R			
6. SCREENING	3/23		Jan	944	G	R			
7.									
8.									
9.									

QA INPUT: DATE	280323
TIME	9:20
QTY	986
QA OUTPUT: DATE	280323
TIME	9:20
QTY	944
WIP REJECT: DATE	280323
TIME	9:20
QTY	92

REJECTION/ ABNORMALITY HISTORY

Customer Claim:

Notes:

REMARKS

PROD PLAN: ADD #10 PLAN 2025-080

SANYO DENKI PHILIPPINES INC.

Item Code

00949347-01

Quantity

10 pcs.

Item Description

BOX PRINT SPECIFICATION

Lot No. / Ref. NO.

250323-00641-141

Supplier's QC

PASSED

INSPECTION

Re: IS OK

QA: CG3148



KANEPACKAGE PHILIPPINE INC.

SCREENING INSPECTION REPORT (CORRUGATED AND MOULDED ITEMS)

Control No.

SQB-03-002405

I. Item Information

Customer	SANYO DENKI PHILS INC	Inspection Date	250923	Shift:	<input checked="" type="checkbox"/> Day <input type="checkbox"/> Night
Location	NORTH	Delivery Date	250321		
Item Code	00949347-01	Job Order No.	JO25-M-00641-141		
Item Description	PRINT SPECIFICATION	Job Order Qty.	1,000		
Model	N/A	Inspection Method	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> Sampling		
Drawing Revision No.	05	Delivery Receipt No.	744442		
External Provider	TS	Gluing Process	<input type="checkbox"/> Manual Gluing <input type="checkbox"/> Semi-Auto Gluing		
			<input checked="" type="checkbox"/> SD1800		

II. Dimensional Inspection

Time Conducted Sample #1: 3:00			Time Conducted Sample #2: 3:30			Time Conducted Sample #3: 4:00					
Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3	Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3
1	270	±3	270	270	270	16					
2	160	±3	160	160	160	17					
3	143	±3	143	143	143	18					
4	4	±3	4	4	4	19					
5	3	±3	3	3	3	20					
6						21					
7						22					
8						23					
9						24					
10						25					
11						26					
12						27					
13						28					
14						29					
15						30					

Stopwatch

Control Number of Measuring Tool Used

Measuring Tool Used: ☒ Meter Tape ☐ Thickness Gauge ☐ Moisture Content Tester ☐ Weighing Scale ☐ Zahn Cup ☐ Steel Ruler ☐ Stopwatch ☐ Caliper

Control Number of Measuring Tool Used:

24-24018-023

III. Visual Inspection (Leave cell blank if no detection on Applicable Criteria. Ensure to put actual quantity of defect based on classification or "N/A" if Not Applicable)

A. CORRUGATED ITEM / BOX / DANPLA	In-house	External Provider	Total Quantity	B. PALLET	In-house	External Provider	Total Quantity
Scoring	4		4	Condition of Wood	N/A	N/A	N/A
Grain Direction				Rusty Nail	N/A	N/A	N/A
Paper Shade (Off Color)				Warping	N/A	N/A	N/A
Bubbles				Fumigation Stamp	N/A	N/A	N/A
Blister				Crack/ Damages	N/A	N/A	N/A
Wrinkle				Others	N/A	N/A	N/A
Delamination				C. CORRUGATED PALLET	In-house	External Provider	Total Quantity
Uneven Kraft liner				Color of Carton (Discoloration)	N/A	N/A	N/A
Warping				Flute of Material	N/A	N/A	N/A
Cracking on edge				Type of Adhesion	N/A	N/A	N/A
Bursting / Bursting on Edge (Crowfeet)				Adhesion of Runner	N/A	N/A	N/A
Wrong die-cut orientation				Rusty Wire	N/A	N/A	N/A
Inverted die-cut				Wrong Orientation	N/A	N/A	N/A
Close Gap/ Wide Gap				Damages:	N/A	N/A	N/A
Print Color:				Others:	N/A	N/A	N/A
Missing Print/ Character				D. MOULDED ITEMS	In-house	External Provider	Total Quantity
Blotted Print				Poor Fusion	N/A	N/A	N/A
Smeared Print				Chip Off	N/A	N/A	N/A
Other Print Defect	Missed aligned	22	22	Warp / Deform	N/A	N/A	N/A
Linemark		2	2	Crack	N/A	N/A	N/A
Fish-eye				Broken	N/A	N/A	N/A
Stain: glue stain	2		2	Scratches	N/A	N/A	N/A
Excess Glue				Foreign Materials	N/A	N/A	N/A
Gluing Defect:				Wet / Moist	N/A	N/A	N/A
Worn-out	3		3	Dirt	N/A	N/A	N/A
Dent	1		1	Stain:	N/A	N/A	N/A
Punctured				Discoloration	N/A	N/A	N/A
Tear-off	2		2	Excess Flashes	N/A	N/A	N/A
Peel-off				Others:	N/A	N/A	N/A
Damages:							
Others: oil stain	5		5				

Total = 42

**SCREENING INSPECTION REPORT
(CORRUGATED AND MOULDED ITEMS)**

Joint Flap		Judgement		Type of Material			
Requirement	Actual	Good	No Good	Requirement	Actual	Good	No Good
GLUED (Inside or Outside)	INSIDE	✓		Corrugated	TX200	TX200	✓
STITCHED (Inside or Outside)	2/1			Flute	BF	BF	✓
				Others			
IV. Destructive Test (Based on Customer Requirement)				V. Barcode Print (If Only with Printed Barcode on Item)			
Requirement	Actual	Good	No Good	Scan 1		<input type="checkbox"/> Good	<input type="checkbox"/> No Good
	2/1			Scan 2		<input type="checkbox"/> Good	<input type="checkbox"/> No Good
				BQICS Compliance (For Epson items only)		<input type="checkbox"/> Good	<input type="checkbox"/> No Good
VI. Inspection Result				VII. Sampling Inspection Result			
Total Qty Inspected	986	Defect Rate Formula:		Total Sampling Qty Inspected			
Total Qty Good	944	Total Quantity NG		Total Sampling Qty Good			
Total Qty NG	42	Total Qty. Inspected x100		Total Sampling Qty NG			
Defect Rate in %	4.26%	PPM Formula:		Defect Rate in %			
Defect Rate in PPM	42596.3	Total Quantity NG		Defect Rate in PPM			
		Total Qty. Inspected x1,000,000					
VIII. Disposition				IX. Remarks			
<input checked="" type="checkbox"/> Good <input type="checkbox"/> Backload <input type="checkbox"/> For Sorting <input type="checkbox"/> For Rework							
<input type="checkbox"/> For Special Acceptance <input type="checkbox"/> Conditional (Please indicate details)							
Abnormality Report Control No.: 110205-03-130							
Inspected by		Checked by		Approved by (If there are major concerns)		Verified by (If there are major concerns)	
I. Leonardo		J. Feltm					
QA Screening Inspector		QA Line Leader		QA Supervisor / QA Asst. Supervisor		QA Head	
X. Reject & Reworks Item Verification							
Defect	Verification Quantity		Remarks:	Verified by (Signature over Printed Name)			
	Good	No-Good					
Total							
				R&R Staff			
				Received by (Signature over Printed Name)			
				QA Inspector			

[illegible]