
 KANEPACKAGE PHILIPPINE INC.		ABNORMALITY REPORT		Control No.	
				AR2025-04-061	
I. Item Information					
Item Code	D02Y4T001	Customer	BROTHER		
Item Description	PRINTED CARTON E115B CHN	Delivery Date	250412		
Inspection Date	250413	Inspection Time	7:00 PM		
Lot Quantity	995 PCS	Job Order Number	JO25-M-01160-81		
Affected Quantity	28 PCS	Origin	<input checked="" type="checkbox"/> IN-HOUSE <input type="checkbox"/> SUPPLIER:		
Rejection Rate and PPM	2.81% 28,140 PPM	Date Received	N/A		
Sampling Quantity (IQA)	N/A	Detection (Section / Area)	SCREENING 2		
Problem Description	BLOTTED PRINT	Delivery Receipt Number	N/A		
II. Visual Reference (Defect Illustration)					
GOOD			NO GOOD		
					
					
Related Doc. Info. <input checked="" type="checkbox"/> Procedure Manual : <input checked="" type="checkbox"/> Technical Drawing : <input checked="" type="checkbox"/> Work Instruction : <input checked="" type="checkbox"/> Job Order : <input checked="" type="checkbox"/> Reports : <input checked="" type="checkbox"/> Defect Limit :		Control Number PM-QA-018 BIP-0616-01AB-02 WI-QA-001-010 JO25-M-01160-81 AR2025-04-061 BROTHER DEFECT LIMIT	Requirement: ACCEPTABLE AS LONG AS IT IS STILL READABLE Actual: WITH SEVERE BLOTTED PRINT. NOT ACCEPTABLE Conclusion or Recommendation: REJECT	<input checked="" type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable	
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		<input type="checkbox"/> Backload <input type="checkbox"/> Good <input type="checkbox"/> For Sorting <input type="checkbox"/> For Rework			
		If item is for sorting, for backload, or for rework, fill-out below,			
		Person In Charge	Target Date	Signature	
Remarks:				JUDGEMENT (If subject is for issuance of IRF / CAR) <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	 J. RELTORA		 M. CASILLANO		
QA Inspector	QA Line Leader	ME Head	QA Head	QA Staff	
Important: Backloading Policy (External Provider Rejects) Rejection rate that is more than 80% of the total quantity shall be approved by Top Management before backloading.		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.



Kanepackage Philippines Inc.

1270

157 28
129

PR-001-F12-REV.00

MEMO: APR PLAN

JOB ORDER

Labay, Menchie
SO #: SO25-M-01160

Customer : BROTHER INDUSTRIES (PHILS.), INC.		JOB ORDER:	
ITEM CODE: D02Y4T001		JO25-M-01160-81	
Netsuite Itemcode : D02Y4T001			
Item Description : PRINTED CARTON E115B CHN			
QTY: 1000	DELIVERY DATE: 2025-04-12	CREATED BY: Tuiza, Jecille Maduro	DATE RELEASED: 2025-04-05

Raw Material Code:	Qty To Be Used:	Over Run:	Cut Size:	Actual Issued:	DR#:	SUPPLIER:
475X728 EF NPK170	1000	20	475X728 EF	1020	0203226	PW

Tooling Reference # E-51B **150** Control/Batch #: RM Issued By: **Slana** **4/11**

PROCESS / MACHINE	DATE	IN-CHARGE		GOOD QTY	TRIAL RUN		REJECTED QTY		REMARKS
		Operator	ME/QA		G	R	INHOUSE	SUPPLIER	
1. EQOS	04/11	JADE	Peter 4/11	1020	G	R			
2. DIECUT S1700	4/12	Jm	Jenny	1070	G	R			
3. DETACHING 1	4/13	DS		1010	G	R			
4. GLUING SD 1800	4/13	Netly JEFF JAN		995	G	R			
5. LOT NUMBERING	04-13		Duen	980	G	R			
6. SCREENING	04-13		Ian	838	G	R	157		PRODUCTION OUT
7.									
8.									
9.									

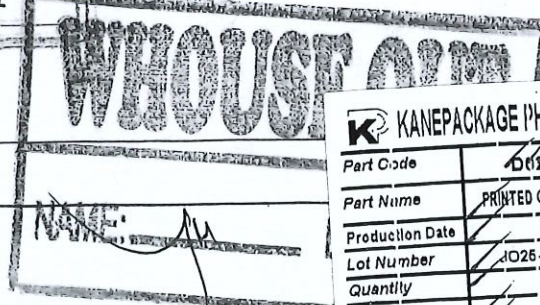
QA INPUT : DATE 250413
TIME 8:31 QTY 995
QA OUTPUT : DATE 250413
TIME 8:31 QTY 838
WIP REJECT DATE 250413
TIME 8:31 QTY 157

REJECTION/ABNORMALITY HISTORY

Customer Claim:

Notes:

REMARKS
PROD PLAN: ADD #0 PLAN 2025-102



KANEPACKAGE PHILIPPINES INC.	
Part Code	D02Y4T001
Part Name	PRINTED CARTON E115B CHN
Production Date	250413
Lot Number	JO25-M-01160-81
Quantity	20 pcs.
P.O.	N/A
Mold No./Cavity	N/A
Operator	CA-CG3148
Stamp	MP



KANEPACKAGE PHILIPPINE INC.

SCREENING INSPECTION REPORT (CORRUGATED AND MOULDED ITEMS)

Control No.

SQB-04-001270

I. Item Information

Customer	BROTHER INDUSTRIES (PHILS.), INC.	Inspection Date	25/4/13	Shift: <input type="checkbox"/> Day <input checked="" type="checkbox"/> Night
Location	BATANGAS	Delivery Date	250412	
Item Code	D02Y4T001	Job Order No.	JO25-M-01160-81	
Item Description	PRINTED CARTON E115B CHN	Job Order Qty.	1,000	
Model	N/A	Inspection Method	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> Sampling	
Drawing Revision No.	02	Delivery Receipt No.	0203226	
External Provider	PLW	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: 7:00				Time Conducted Sample #2: 7:30			Time Conducted Sample #3: 8:30				
Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3	Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3
1	234	3	234	234	234	16					
2	94.5		94.5	95	95	17					
3	254		254	255	255	18					
4	14	5	14	14	14	19					
5	15		15	15	15	20					
6	13		13	13	13	21					
7	10		10	11	11	22					
8						23					
9						24					
10						25					
11						26					
12						27					
13						28					
14						29					
15						30					

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

Control Number of Measuring Tool Used:

29-24015-223

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				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
Warpage				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: <u>poor print</u>	129		129	Warp / Deform	N/A	N/A	N/A
Linemark				Crack	N/A	N/A	N/A
Fish-eye				Broken	N/A	N/A	N/A
Stain: _____				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				Dirt	N/A	N/A	N/A
Dent				Stain: _____	N/A	N/A	N/A
Punctured				Discoloration	N/A	N/A	N/A
Tear-off				Excess Flashes	N/A	N/A	N/A
Peel-off				Others:	N/A	N/A	N/A
Damages: _____							
Others: <u>blotted print</u>	28		28				

Total = 157