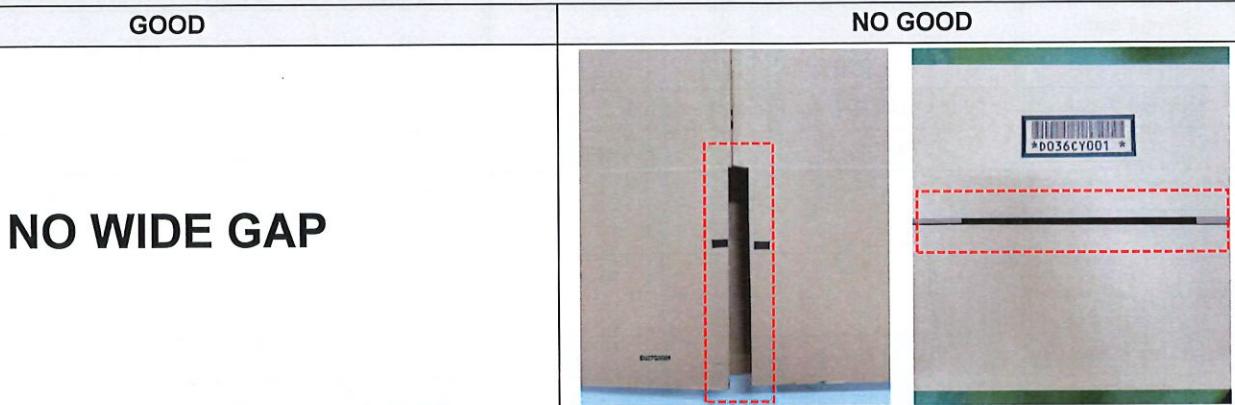


I. Item Information

Item Code	D036CY001	Customer	BROTHER INDUSTRIES
Item Description	CARTON MFC-T930DW CEE-C	Delivery Date	250626
Inspection Date	250627	Inspection Time	7:00 AM
Lot Quantity	281 PCS	Job Order Number	JO25-M-02262-1A
Affected Quantity	32 PCS	Origin	<input checked="" type="checkbox"/> IN-HOUSE <input type="checkbox"/> SUPPLIER:
Rejection Rate and PPM	11.38% 113,879 PPM	Date Received	N/A
Sampling Quantity (IQA)	N/A	Detection (Section / Area)	SCREENING 3
Problem Description	WIDE GAP	Delivery Receipt Number	N/A

II. Visual Reference (Defect Illustration)



III. Documented Information Review (To be filled out by Qa Line Leader)

Related Doc. Info.	Control Number	Requirement:	NO WIDE GAP
<input checked="" type="checkbox"/> Procedure Manual :	PM-QA-018		
<input checked="" type="checkbox"/> Technical Drawing :	BIP-0834-01AB-04	Actual:	WITH WIDE GAP
<input checked="" type="checkbox"/> Work Instruction :	WI-QA-001-010		
<input checked="" type="checkbox"/> Job Order :	JO25-M-02262-1A		<input checked="" type="checkbox"/> Applicable
<input checked="" type="checkbox"/> Reports :	AR2025-06-064		<input type="checkbox"/> Not Applicable
<input checked="" type="checkbox"/> Defect Limit :	BROTHER DEFECT LIMIT	Conclusion or Recommendation:	REJECT

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
		<input type="checkbox"/> For Sorting	Target Date
		<input type="checkbox"/> For Rework	Signature

Remarks:

JUDGEMENT
(If subject is for issuance of IRF / CAR)

FOR 5 WHY ISSUANCE
 FOR CAR ISSUANCE
 FOR IRF ISSUANCE

Detected by	Checked by	Initial Approved by (If Needed)	Approved by	Received By
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.

Important: Backloading Policy (External Provider Rejects)	Evaluation	Approved by	Final Disposition
	<input type="checkbox"/> <80% No Need		<input type="checkbox"/> Backload
	<input type="checkbox"/> >80% Need		<input type="checkbox"/> Accept

Top Management



VII. Sorting Instructions

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								

IX. Warehouse Details (To be filled out by QA Line Leader If needed)

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

X. Reworking Instructions

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				

XII. Reinspection Result

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		

KANEPACKAGE PHILIPPINE INC.

SCREENING INSPECTION REPORT
(CORRUGATED AND MOULDED ITEMS)

Control No.

SQA-06-001902

I. Item Information

Customer	BROTHER INDUSTRIES (PHLIS.), INC.	Inspection Date	270627	Shift: <input checked="" type="checkbox"/> Day <input type="checkbox"/> Night
Location	Laguna	Delivery Date	250626	
Item Code	D036CY001.C1	Job Order No.	JO25-M-02262-1A	
Item Description	CARTON MFC-T930DW CEE-C; A	Job Order Qty.	770	
Model	N/A	Inspection Method	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> Sampling	
Drawing Revision No.	04	Delivery Receipt No.	00561	
External Provider	PLW	Gluing Process	<input checked="" type="checkbox"/> Manual Gluing <input type="checkbox"/> Semi-Auto Gluing <input type="checkbox"/> SD1800	

II. Dimensional Inspection

Time Conducted Sample #1: 6:30			Time Conducted Sample #2: 7:00			Time Conducted Sample #3: 7:50					
Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3	Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3
1	500	7	500	500	500	16					
2	270	+3	270	270	270	17					
3	526		526	52	524	18					
4	15		15	15	15	19					
5	25	+5	25	25	25	20					
6	17	-5	17	17	17	21					
7	16		16	16	16	22					
8						23					
9						24					
10						25					
11						26					
12						27					
13						28					
14						29					
15						30					

Measuring Tool Used: Meter Tape Moisture Content Tester Zahn Cup Stopwatch
 Thickness Gauge Weighing Scale Steel Ruler Caliper Control Number of Measuring Tool Used: M1-23052-770

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	2		2	Condition of Wood	N/A	N/A	N/A
Grain Direction				Rusty Nail	N/A	N/A	N/A
Paper Shade (Off Color)	N/			Warping	N/A	N/A	N/A
Bubbles	N/			Fumigation Stamp	N/A	N/A	N/A
Blister				Crack/ Damages	N/A	N/A	N/A
Wrinkle	2		2	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	N/			Type of Adhesion	N/A	N/A	N/A
Bursting / Bursting on Edge (Crowfeet)	N/			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	32		32	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	N/			Poor Fusion	N/A	N/A	N/A
Smeared Print	N/			Chip Off	N/A	N/A	N/A
Other Print Defect :	N/			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 :	>		5	Scratches	N/A	N/A	N/A
Excess Glue				Foreign Materials	N/A	N/A	N/A
Gluing Defect : <i>misaligned</i>	9		9	Wet / Moist	N/A	N/A	N/A
Worn-out				Dirt	N/A	N/A	N/A
Dent	8		8	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	2		2	Others:	N/A	N/A	N/A
Damages :							
Others :							



KANE PACKAGE PHILIPPINE INC.

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

Joint Flap		Judgement		Type of Material		Judgement		
Requirement		Actual	Good	No Good	Requirement	Actual	Good	No Good
GLUED (Inside or Outside)	inside	inside	—		Corrugated	AKITA	AKITA	✓
					Flute	CF	CF	—
STITCHED (Inside or Outside)	N	✓			Others	N	✓	

IV. Destructive Test (Based on Customer Requirement)

V. Barcode Print (If Only with Printed Barcode on Item)

V. Constructive Test (Based on Customer Requirements)				V. Barcode Print (If Only with Printed Barcode on Item)			
Requirement	Actual	Good	No Good	Scan 1	Scan 2		
<i>N/A</i>				<i>N/A</i>	<i>N/A</i>	<input type="checkbox"/> Good	<input type="checkbox"/> No Good

VI. Inspection Result

VII. Sampling Inspection Result

V. Inspection Result		VI. Sampling Inspection Result	
Total Qty Inspected	281	Defect Rate Formula:	Total Sampling Qty Inspected
Total Qty Good	221	Total Quantity NG	Total Sampling Qty Good
Total Qty NG	60	Total Qty. Inspected	Total Sampling Qty NG
Defect Rate in %	21.35%	PPM Formula:	Defect Rate in %
in PPM	213,223 ppm	Total Quantity NG x 1,000,000	in PPM
		Total Qty. Inspected	

VIII. Disposition

<input checked="" type="checkbox"/> Good	<input type="checkbox"/> For Special Acceptance
<input type="checkbox"/> Backload	<input type="checkbox"/> Conditional (Please indicate details)
<input type="checkbox"/> For Sorting	
<input type="checkbox"/> For Rework	
Abnormality Report Control No.: <u>PR2025-06-004</u>	

IX. Remarks

Inspected by

Checked by

Approved by
(If there are major concerns)

Verified by
(where are major concerns)

J. Krusen

Smith

QA Screening Inspector

speculator

Digitized by srujanika@gmail.com

ANSWER

QA Head 240628

X. Reject & Reworks Item Verification

Defect	Verification Quantity		Remarks:	Verified by (Signature over Printed Name)
	Good	No-Good		
				R&R Staff
				Received by (Signature over Printed Name)
Total				QA Inspector

XI. Overall Inspection Time

CORRUGATED AND MOULDED ITEMS