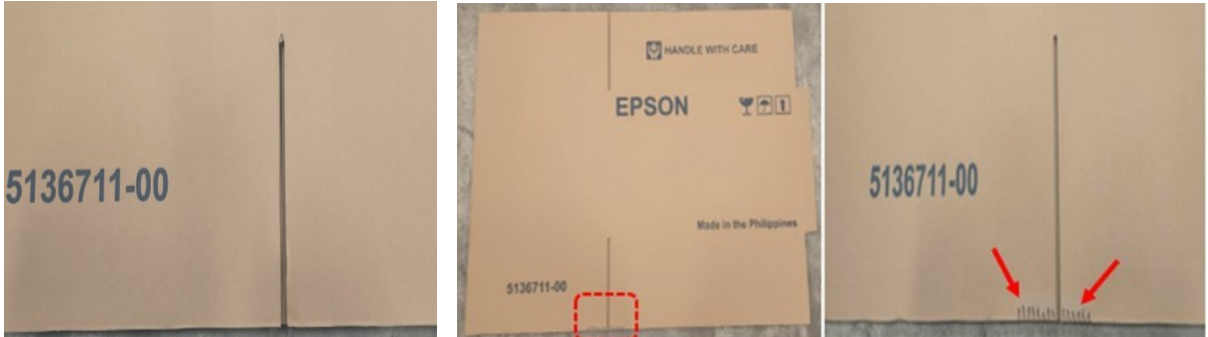
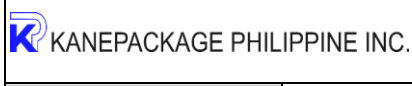
 KANEPACKAGE PHILIPPINE INC.		ABNORMALITY REPORT		Control No.	
				AR-01-0005	
I. Item Information					
Item Code	5136711-00	CUSTOMER	EPSON PRECISION (PHILIPPINES), INC.- IJP		
Item Description	OUTER CARTON BOX	Delivery Date	2026/01/05		
Inspection Date	2026/01/07	Inspection Time	1828H - 2100H		
Lot Quantity	2500	Job Order Number	1.JOL-00023241		
Affected Quantity	112	Origin	<input checked="" type="checkbox"/> IN-HOUSE <input type="checkbox"/> SUPPLIER:		
Rejection Rate and PPM	4.48% 44,800 PPM	Date Received	2026/01/06		
Sampling Quantity (IQA)	N/A	Detection (Section / Area)	SA2600/SHIFT B		
Problem Description	PEEL OFF	Delivery Receipt Number	372158		
II. Visual Reference (Defect Illustration)					
GOOD			NO GOOD		
<div>ITEM SHOULD BE NO PEEL OFF ON ACTUAL APPERANCE AS GOOD CONDITION AND TOLERANCE</div>					
III. Documented Information Review (To be filled out by QA Line leader)					
Related Doc. Info.		Control Number	Requirement:	ITEM SHOULD BE IN GOOD CONDITION NO OCCURRENCE OF PEEL OFF	
<input type="checkbox"/> Procedure Manual :			Actual:	PEEL OFF OCCUR ON LOWER PORTION CLASS B/C	
<input type="checkbox"/> Technical Drawing :					
<input type="checkbox"/> Work Instruction :					
<input type="checkbox"/> Job Order :			Conclusion and Recommendation:	CHECK THE PROCESS FOR WHAT IS THE POSSIBLE CAUSE OF THAT REJECT AND HOW IT OCCURRED	
<input type="checkbox"/> Reports :				<input type="checkbox"/> Applicable	
<input type="checkbox"/> Defect Limit :				<input type="checkbox"/> Not Applicable	
IV. Initial Disposition (To be filled out by ME Department If Needed)			V. Final Disposition		
<input type="checkbox"/> Good <input type="checkbox"/> Conditional (Please indicate details)			<input checked="" type="checkbox"/> Rejected <input type="checkbox"/> Conditional (Please indicate details)		
<input checked="" 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		
Remarks:			JUDGEMENT (If subject is for issuance of IRF / CAR)		
EQOS / SHIFT A / 260107			F <input type="checkbox"/> 5 WHY ISSUANCE		
			F <input type="checkbox"/> CAR ISSUANCE		
			<input type="checkbox"/> FOR IRF ISSUANCE		
Detected by		Checked by	Initial Approved by (If Needed)	Approved by	Received By
J.ESLANAN		R.MANALO			
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	
		<input type="checkbox"/> <80% No Need			
		<input type="checkbox"/> >80% Need		Top Management	
				Final Disposition	
				<input type="checkbox"/> Backload	
				<input type="checkbox"/> Accept	
				<input type="checkbox"/> Other _____	

				<h1>ABNORMALITY REPORT</h1>				
V. Sorting Instructions								
VI. 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								
VII. Warehouse Details (To be filled out by QA Line Leader If needed)								
	Reason			Total Quantity	Remarks		Received by	
Pull-Out								
For Transfer								
VIII. Reworking Instructions								
IX. 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			
X. 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		Noted by		Approved by	
QA Inspector			QA Line Leader/Sub-Leader		QA Supervisor		QA Head	