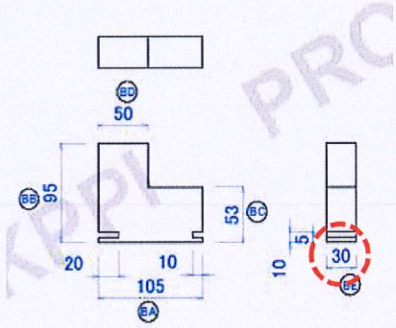
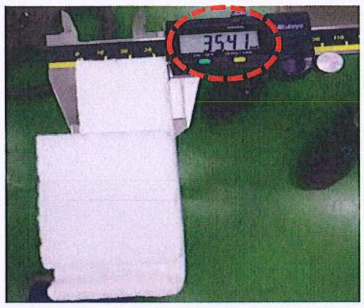
KANEPACKAGE PHILIPPINE INC.	ABNORMALITY REPORT	Control No.
		AR2025-11-011

I. Item Information

Item Code	516645900	Customer	EPSON IJP
Item Description	PAD, SCN, BOTTOM, LR, ASP	Delivery Date	251105
Inspection Date	251105	Inspection Time	3:30PM
Lot Quantity	800 PCS	Job Order Number	JO-25-L-0279-19
Affected Quantity	36 PCS	Origin	☑ IN-HOUSE ☐ SUPPLIER:
Rejection Rate and PPM	4.50% 45,000 PPM	Date Received	N/A
Sampling Quantity (IQA)	N/A	Detection (Section / Area)	SCREENING 6
Problem Description	OFF SPECS THICKNESS	Delivery Receipt Number	N/A

II. Visual Reference (Defect Illustration)

GOOD	NO GOOD
	

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

Related Doc. Info.	Control Number		
☑ Procedure Manual :	PM-QA-018	Requirement:	30MM THICKNESS (TOLERANCE: +-2MM)
☑ Technical Drawing :	EPL-0654-03		
☑ Work Instruction :	WI-QA-001-010	Actual:	35MM
☑ Job Order :	JO-25-L-0279-19		
☑ Reports :	AR2025-11-011	Conclusion or Recommendation:	REJECT ☑ Applicable ☐ Not Applicable
☑ Defect Limit :	GENERAL DEFECT LIMIT		

IV. Initial Disposition (To be filled out by ME Department If Needed)

☐ Good ☐ Rejected ☐ Backload	☐ Conditional (Please indicate details)
☑ Rejected ☐ Backload ☐ Good ☐ For Sorting ☐ For Rework	☐ Conditional (Please indicate details)

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)
☐ FOR 5 WHY ISSUANCE
☐ FOR CAR ISSUANCE
☐ FOR IRF ISSUANCE

Detected by	Checked by	Initial Approved by (If Needed)	Approved by	Received By
M. MAGAYANES	A. FILIPINAS		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
☐ <80% No Need ☐ >80% Need	Top Management	☐ Backload ☐ Accept ☐ Other ________

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

KANEPACKAGE PHILIPPINE INC.

ABNORMALITY REPORT

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
☐ Pull-Out				
☐ 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

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

12-5
67

172

PR-001-F12-REV.00

Kanepackage Philippine Inc.

MEMO: - None -

Karen Manalo

JOB ORDER

SO # : TO-25-L-0279

Customer : EPSON PRECISION (PHILIPPINES), INC. - IJP	JOB ORDER: 59068
ITEM CODE: 516645900 Netsuite Itemcode : 516645900	JO-25-L-0279-19
Item Description : PAD,SCN,BOTTOM,LR,ASP	

QTY:	DELIVERY DATE:	CREATED BY:	DATE RELEASED:
800	2025-11-04	JECEL BALINGBING BUCE	2025-10-27

Raw Material Code:	Qty To Be Used:	Over Run:	Cut Size:	Actual Issued:	DR#:	SUPPLIER:
PP45	6		345x326x30mm 335x315	5	321870	6K

Tooling Ref# -

Ctrl/Batch #:

RM Issued By: 04 11-03

PROCESS / MACHINE	DATE	IN-CHARGE Operator	ME/QA	GOOD QTY	TRIAL RUN	REJECTED QTY INHOUSE	SUPPLIER	REMARKS
1. SLICING	11/03	TONY		12	2 G R	—		
2. VERTICAL	11/03	SHE		67	G R	—		
3. PRESSING	11/04	Shue		67	1 G R			
4. DETACHING 3-PACKING	11/05	Ana		800	G R			
5. LOT NUMBERING					G R			
6. SCREENING	11/5		micgy	900	G R			
7.								
8.								
9.								

REJECTION/ ABNORMALITY HISTORY

Customer Claim:

Notes:

PRODUCTION OUT
BY:
DATE: 11/5
KP SYSTEM

WAREHOUSE OUT
DATE: 11/3

REMARKS

PROD PLAN: ADD #0 PLAN 2025-308

*** UNCONTROLLED COPY FOR JOB ORDER ***

2025-10-27 Issued by:

BLADE REQUIREMENT

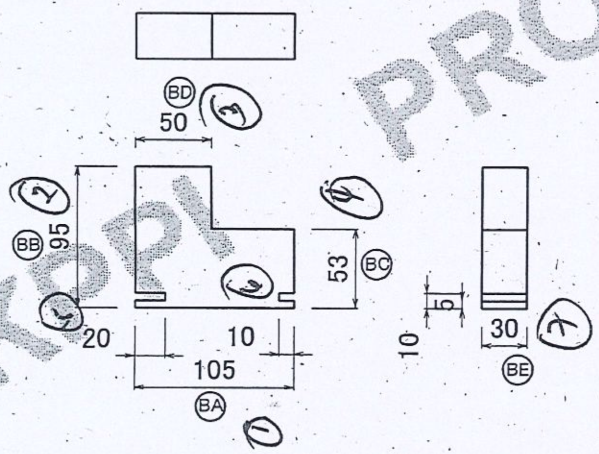
WOOD	Size: 435 X 416		Thickness: 18MM	
Type	Height	Thickness	Pitch	Length
Cutting Blade	23.8mm	3 pts		8571mm
Waved Blade				
Perforation				
Half-Cut				
Creasing Line				

RoHS

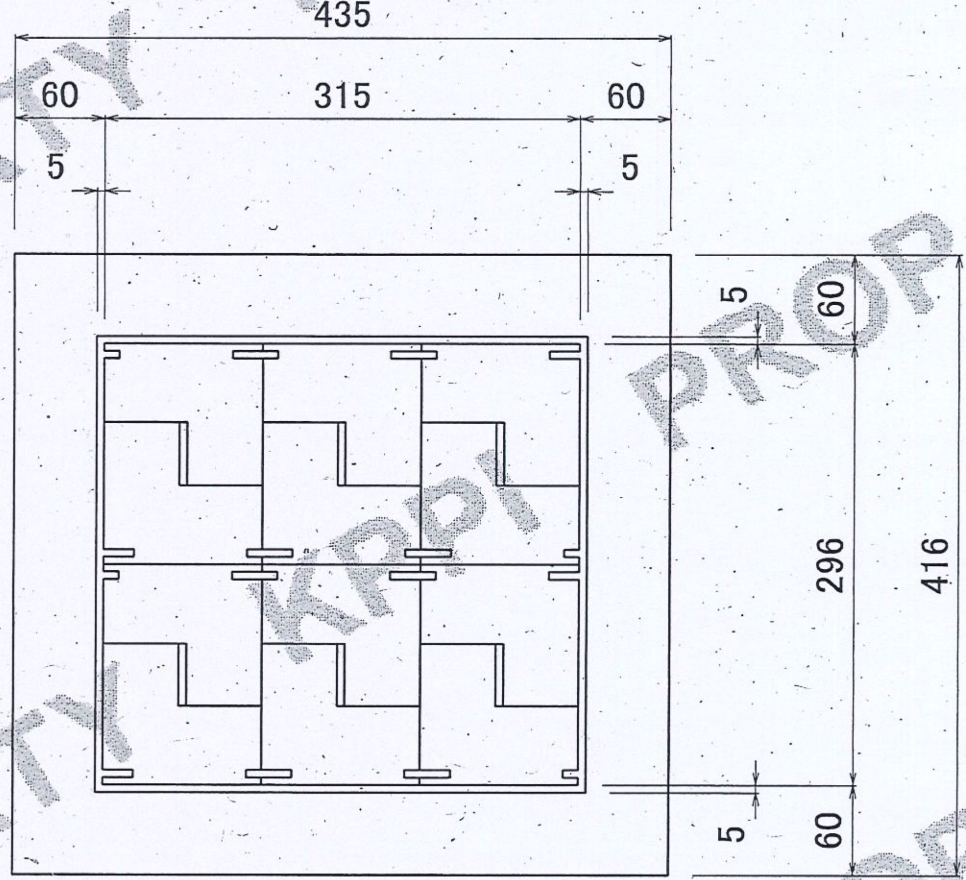
QUALITY INSPECTION CHARACTERISTICS	
GRADE A	Ⓐ
GRADE B	BA ~ BE

NOTE :

Ⓐ 1. APPEARANCE SHALL COMPLY TO THE DEFECT LIMIT STANDARD



MOULD SIZE: 435 X 416
BLADE SIZE: 315 X 296
SHEET SIZE: 345 X 326 X 30



CUSTOMER : EPSON PRECISION (PHILIPPINES),INC-EPLB	
ITEM DESCRIPTION/PART CODE: 516645900 LIONEL (COMMON) PAD,SCN,BOTTOM,LR,ASP	CUSTOMERS SUPPLIED REFERENCE NO.: 5166459-01
	ITEM KEY : EPL-4654-03AA
	1-1 PAGE:

TOLERANCE	
DIMENSION:	+/-2
>=50	+/- 1
51~200	+/- 2
201-400	+/- 3
401-700	+/- 4
701-1000	+/- 5
1000<	+/- 8
PRINT:	

MATERIAL: PP45

LEGEND: UNITS: mm N.T.S.
-CUTTING
-CREASING
-HALF-CUT
-PERFORATION
-HOLE

PROCESS					
1	SLICING	7		13	
2	VERTICAL	8		14	
3	PRESSING	9		15	
4	LOT NUMBERING	10		16	
5	QA SCREENING	11		17	
6	OQA	12		18	

KANEPACKAGE PHILIPPINE INC.
#5 Ring Rd. LISP 2 Brgy. Lamesa Calamba, Laguna
Tel. Nos.:(049)545-7166 to 89
Fax Nos.:(049)545-7170/(049)545-6302

REV. #	DATE	REASON	REQUESTED BY:
0	22/11/18		

PACKING INSTRUCTION: PACKED IN PE BAG

DRAWN BY:	CHECKED BY:	APPROVED BY:
A. DE ROXAS	D.TAPAY	S. LUBAG

KANEPACKAGE PHILIPPINE INC.	SCREENING INSPECTION REPORT (CORRUGATED AND MOULDED ITEMS)	Control No. SQB-11-000172

I. Item Information

Customer	EPSON Precision Phils. Inc. -IJP	Inspection Date	251104 — Shift: ☑ Day ☐ Night
		Delivery Date	251104
Location	BATANGAS	Job Order No.	JO-25-L-0279-19
Item Code	516645900	Job Order Qty.	800
Item Description	PAD,SCN,BOTTOM,LR,ASP	Inspection Method	☑ 100% ☐ Sampling
Model	N/A	Delivery Receipt No.	321070
Drawing Revision No.	00	Gluing Process	☐ Manual Gluing ☐ Semi-Auto Gluing ☐ SD1800
External Provider	kk		

II. Dimensional Inspection

Time Conducted Sample #1: 1:00 Time Conducted Sample #2: 1:30 Time Conducted Sample #3: 2:00

Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3	Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3
1	104	±2	104	104	104	16					
2	95		94	95	95	17					
3	50		51	50	50	18					
4	53		53	54	53	19					
5	20		20	20	21	20					
6	10		10	10	10	21					
7	30		32	32	32	22					
8						23		N			
9						24					
10						25			A		
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: 24-02028-216

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

A. CORRUGATED ITEM / BOX / DANPLA	In-house	External Provider	Total Quantity
Scoring	N/A	N/A	N/A
Grain Direction	N/A	N/A	N/A
Paper Shade (Off Color)	N/A	N/A	N/A
Bubbles	N/A	N/A	N/A
Blister	N/A	N/A	N/A
Wrinkle	N/A	N/A	N/A
Delamination	N/A	N/A	N/A
Uneven Kraft liner	N/A	N/A	N/A
Warpage	N/A	N/A	N/A
Cracking on edge	N/A	N/A	N/A
Bursting / Bursting on Edge (Crowfeet)	N/A	N/A	N/A
Wrong die-cut orientation	N/A	N/A	N/A
Inverted die-cut	N/A	N/A	N/A
Close Gap/ Wide Gap	N/A	N/A	N/A
Print Color : ____	N/A	N/A	N/A
Missing Print/ Character	N/A	N/A	N/A
Blotted Print	N/A	N/A	N/A
Smeared Print	N/A	N/A	N/A
Other Print Defect : ____	N/A	N/A	N/A
Linemark	N/A	N/A	N/A
Fish-eye	N/A	N/A	N/A
Stain : ____	N/A	N/A	N/A
Excess Glue	N/A	N/A	N/A
Gluing Defect : ____	N/A	N/A	N/A
Worn-out	N/A	N/A	N/A
Dent	N/A	N/A	N/A
Punctured	N/A	N/A	N/A
Tear-off	N/A	N/A	N/A
Peel-off	N/A	N/A	N/A
Damages : ____	N/A	N/A	N/A
Others :	N/A	N/A	N/A

B. PALLET	In-house	External Provider	Total Quantity
Condition of Wood	N/A	N/A	N/A
Rusty Nail	N/A	N/A	N/A
Warping	N/A	N/A	N/A
Fumigation Stamp	N/A	N/A	N/A
Crack/ Damages	N/A	N/A	N/A
Others	N/A	N/A	N/A

C. CORRUGATED PALLET	In-house	External Provider	Total Quantity
Color of Carton (Discoloration)	N/A	N/A	N/A
Flute of Material	N/A	N/A	N/A
Type of Adhesion	N/A	N/A	N/A
Adhesion of Runner	N/A	N/A	N/A
Rusty Wire	N/A	N/A	N/A
Wrong Orientation	N/A	N/A	N/A
Damages: ____	N/A	N/A	N/A
Others : ____	N/A	N/A	N/A

D. MOULDED ITEMS	In-house	External Provider	Total Quantity
Poor Fusion 1 OFF spec thickness	36		36
Chip Off Reqt: 30mm ±2			
Warp / Deform actual 34mm			
Crack			
Broken			
Scratches		N	
Foreign Materials			
Wet / Moist			
Dirt		A	
Stain : ____			
Discoloration			
Excess Flashes			
Others :			

KANEPACKAGE 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)	N/A				Corrugated Flute N/A			
STITCHED (Inside or Outside)					Others PP45	PP45		

IV. Destructive Test *(Based on Customer Requirement)*			
Requirement	Actual	Good	No Good
N/A			

V. Barcode Print *(If Only with Printed Barcode on Item)*			
Scan 1	N/A	☐Good	☐ No Good
Scan 2		☐Good	☐ No Good
BQICS Compliance (For Epson items only)		☐Good	☐ No Good

VI. Inspection Result		
Total Qty Inspected	800	**Defect Rate Formula:** $\frac{\text{Total Quantity NG}}{\text{Total Qty. Inspected}} \times 100$
Total Qty Good	764	
Total Qty NG	36	**PPM Formula:** $\frac{\text{Total Quantity NG}}{\text{Total Qty. Inspected}} \times 1{,}000{,}000$
Defect Rate in % / in PPM	4.5% / 45,000 PPM	

VII. Sampling Inspection Result	
Total Sampling Qty Inspected	
Total Sampling Qty Good	
Total Sampling Qty NG	N/A
Defect Rate in % / in PPM	

VIII. Disposition

☑ Good ☐ For Special Acceptance
☐ Backload ☐ Conditional (Please indicate details)
☐ For Sorting
☐ For Rework Abnormality Report Control No.: ANMR-11-071

IX. Remarks

Inspected by	Checked by	Approved by (If there are major concerns)	Verified by (If there are major concerns)
M. Magayanes			
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		
	N/A			R&R Staff
				Received by (Signature over Printed Name)
Total				QA Inspector

XI. Overall Inspection Time

CORRUGATED AND MOULDED ITEMS

Date	No.of Manpower	Qty	Time Start	Time End	Downtime	Total hrs.	Cause of Downtime
		N/A					