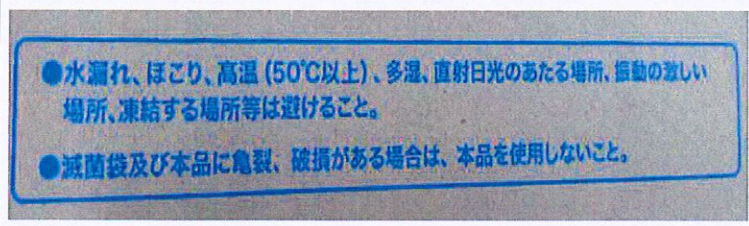


 KANEPACKAGE PHILIPPINE INC.		ABNORMALITY REPORT		Control No.	
				AR2026-01-021	

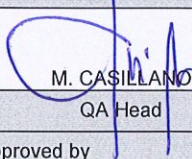
I. Item Information					
Item Code	335MB	Customer	SUPERFLEX (MERASENKO)		
Item Description	AD569001 HME BOX SMALL	Delivery Date	260114		
Inspection Date	260113	Inspection Time	11PM		
Lot Quantity	734 PCS	Job Order Number	JO26-M-00062-1		
Affected Quantity	36 PCS	Origin	☒ IN-HOUSE ☐ SUPPLIER:		
Rejection Rate and PPM	4.90% 49,046 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
	

III. Documented Information Review (To be filled out by Qa Line Leader)				
Related Doc. Info.	Control Number	Requirement:	ACCEPTABLE REGARDLESS OF SIZE AS LONG AS IT IS READABLE	
☒ Procedure Manual :	PM-QA-018			
☒ Technical Drawing :	BIP-0616-01AB-02	Actual:	NOT READABLE	
☒ Work Instruction :	WI-QA-001-010			
☒ Job Order :	JO26-M-00062-1	Conclusion or Recommendation:	REJECT ☒ Applicable ☐ Not Applicable	
☒ Reports :	AR2026-01-021			
☒ Defect Limit :	GENERAL DEFECT LIMIT			

IV. Initial Disposition (To be filled out by ME Department If Needed)					
☐ Good	☐ Conditional (Please indicate details)	☒ Rejected	☐ Conditional (Please indicate details)		
☐ Rejected		☐ Backload	If item is for sorting, for backload, or for rework, fill-out below,		
☐ Backload		☐ Good	Person In Charge	Target Date	Signature
		☐ For Sorting			
		☐ For Rework			

Remarks:		JUDGEMENT (If subject is for issuance of IRF / CAR) ☐ FOR 5 WHY ISSUANCE ☐ FOR CAR ISSUANCE ☒ FOR IRF ISSUANCE
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Detected by	Checked by	Initial Approved by (If Needed)	Approved by	Received By
 N. RANOCO QA Inspector	 A. FILIPINAS QA Line Leader	ME Head	 M. CASILLANO 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 ☐ <80% No Need ☐ >80% Need	Approved by Top Management	Final Disposition ☐ Backload ☐ Accept ☐ Other _____
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Note: All details must be filled out completely.
 Submit this form to Line Leader immediately after accomplishment.

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		



Kanepackage Philippine Inc.

JOB ORDER

PR-001-F12-REV.00

MEMO: FOR COMPLETION

Renz Marlo Custodio

SO #: SO26-M-00062

JO25-M-03811-3

Customer: SUPER FLEX LOGISTIC INC.

ITEM CODE: 335MB-RMFG

Netsuite Itemcode: 335MB-RMFG

Item Description: AD569001 HME BOX SMALL

JOB ORDER:

JO26-M-00062-1



QTY: 734

DELIVERY DATE:

2026-01-14

CREATED BY:

Javier, Charlotte Nicole

DATE RELEASED:

2026-01-12

Raw Material Code:	Qty To Be Used:	Over Run:	Cut Size:	Actual Issued:	DR#:	SUPPLIER:
688X577 EF TX200	367	10	N/A	372	CC001016	P-CV

Tooling Ref# - H-5A R-P134 Ctrl/Batch #: RM Issued By: Jk 1/13/26

PROCESS / MACHINE	DATE	IN-CHARGE		GOOD QTY	TRIAL RUN		REJECTED QTY		REMARKS
		Operator	ME/QA		G	R	INHOUSE	SUPPLIER	
1. EQOS	1/13	EMMO	WCL/13	374	G	R			
2. DIECUT S1700	1/17	JOE		374	G	R			
3. DETACHING 1	1-14	KS		738	G	R			
4. GLUING SD 1800	1/14	Arker Radul netn		727	G	R			
5. LOT NUMBERING	1/14		Diane	700	G	R			
6. SCREENING	1/14		Neil	600	G	R	47		
7.									
8.									
9.									

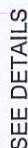
Customer Claim:		REJECTION/ ABNORMALITY HISTORY	
Notes:		JP 1/14	
		KP SYSTEM	

REMARKS

PROD PLAN: ADD #10 PLAN 2026-014

KANEPACKAGE PHILIPPINE, INC. REV.00			
CUSTOMER	MERASENKO CORP.		
ITEM CODE	335MB		
ITEM DESCRIPTION	AD569001 HME BOX SMALL		
ITEM SIZE	240114-JO26-M-00062-1		
LOT NUMBER	20 pcs.		
QUANTITY	20 pcs.		
MP		QA PASSED	
DATE: 1/13/26		DATE: 1/13/26	

SEE DETAILS



LEGEND :
 ————— CUTTING LINE
 - - - - - CREASING LINE
 - - - - - PERFORATION (PITCH) 3x1.5mm

CUSTOMER : MERASENKO		TOLERANCE		MATERIAL:			
ITEM DESCRIPTION/PART CODE:		DIMENSION: +/- 2MM		E FLUTE (TX200/CM125/TX200)			
CUSTOMERS SUPPLIED REFERENCE NO :		<=50 +/- 1 51~200 +/- 2 201~400 +/- 3 401~700 +/- 4 701~900 +/- 5 1000< +/- 8		LEGEND: UNITS: mm $\frac{1}{8}$ IN. T.T.S.			
ITEM KEY :		1/3 1/3		- CUTTING			
MRC-0012-01AB-07		PAGE: 1/3		- CREASING			
AD569001 HME BOX SMALL		1/1 1/1		- HALF CUT.			
335MB		1/1 1/1		- PERFORATION			
250506 DATE		ADDITIONAL HANDHOLE AND CUTTING BLADES. REASON		PACKING INSTRUCTION : 25 PCS. /BUNDLE (COLLAPSED)		DAWN BY: R. PAKKOTOTOMAN CHECKED BY: M. ALONSAGAY	
7 REV. #		250506 DATE		DAWN BY: R. PAKKOTOTOMAN CHECKED BY: M. ALONSAGAY		DAWN BY: R. PAKKOTOTOMAN CHECKED BY: M. ALONSAGAY	
KANEPACKAGE PHIL. INC.		KANEPACKAGE PHIL. INC.		KANEPACKAGE PHIL. INC.		KANEPACKAGE PHIL. INC.	
25 Ring Road, 1st Floor, Lantana Cebu, Laguna		25 Ring Road, 1st Floor, Lantana Cebu, Laguna		25 Ring Road, 1st Floor, Lantana Cebu, Laguna		25 Ring Road, 1st Floor, Lantana Cebu, Laguna	
Tel. Nos. (02)955-57170/(02)955-5302		Tel. Nos. (02)955-57170/(02)955-5302		Tel. Nos. (02)955-57170/(02)955-5302		Tel. Nos. (02)955-57170/(02)955-5302	

SCREENING INSPECTION REPORT (CORRUGATED AND MOULDED ITEMS)

Control No.
SQB-01-000579

I. Item Information

Customer	SUPERFLEX	Inspection Date	26/11/14	Shift: ☐ Day ☒ Night
Location	LAGUNA	Delivery Date	26/11/14	
Item Code	335MB-RMFG	Job Order No.	JO26-M-00062-1	
Item Description	AD569001 HME BOX SMALL	Job Order Qty.	734	
Model	N/A	Inspection Method	☒ 100% ☐ Sampling	
Drawing Revision No.	07	Delivery Receipt No.	06001010	
External Provider	BW	Gluing Process	☐ Manual Gluing ☐ Semi-Auto Gluing ☐ SD1800	

II. Dimensional Inspection

Time Conducted Sample #1: 9:00			Time Conducted Sample #2: 9:30			Time Conducted Sample #3: 10:20					
Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3	Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3
1	186	+2	186	186	186	16					
2	72		72	72	72	17					
3	184		184	184	184	18					
4	358		358	358	358	19					
5						20					
6						21					
7						22					
8						23					
9						24					
10						25					
11						26					
12						27					
13						28					
14						29					
15						30					

Measuring: ☒ Meter Tape ☐ Moisture Content Tester ☐ Zahn Cup ☐ Stopwatch
 Tool Used: ☐ Thickness Gauge ☐ Weighing Scale ☐ Steel Ruler ☐ Caliper
 Control Number of Measuring Tool Used: 28-25179-090

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	36		36	Poor Fusion	N/A	N/A	N/A
Smeared Print				Chip Off	N/A	N/A	N/A
Other Print Defect: MISALIGNED PRINT	4		4	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: OIL STAIN	7		7	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:							

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)	1/11/10	1/11/10	—	Corrugated	1/11/10	—	—
STITCHED (Inside or Outside)	1/11/10	1/11/10	—	Flute	1/11/10	—	—
				Others	1/11/10	—	—

IV. Destructive Test (Based on Customer Requirement)

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

Requirement	Actual	Good	No Good	Scan 1		☐ Good	☐ No Good
				Scan 2		☐ Good	☐ No Good
				BQICS Compliance (For Epson items only)		☐ Good	☐ No Good

VI. Inspection Result

VII. Sampling Inspection Result

Total Qty Inspected		927	Defect Rate Formula: Total Quantity NG Total Qty. Inspected x100	Total Sampling Qty Inspected		
Total Qty Good		680		Total Sampling Qty Good		
Total Qty NG		47		Total Sampling Qty NG		
Defect Rate	in %		PPM Formula: Total Quantity NG Total Qty. Inspected x1,000,000	Defect Rate	in %	
	in PPM	6.46% 64649.2ppm			in PPM	

VIII. Disposition

IX. Remarks

☐ Good ☐ Backload ☐ For Sorting ☐ For Rework	☐ For Special Acceptance ☐ Conditional (Please indicate details)	D21 Abnormality Report Control No.: <u>Amorle-01-029</u>	IX. Remarks ✓
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Inspected by	Checked by	Approved by (If there are major concerns)	Verified by (If there are major concerns)
N. Ramo W			
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		
h	/			
	h			R&R Staff
				Received by (Signature over Printed Name)
Total				QA Inspector

XI. Overall Inspection Time

CORRUGATED AND MOULDED ITEMS

[illegible]