


I. Item Information

Item Code	D03FEE001	Customer	BROTHER
Item Description	CARTON MFC-J5010DW US/CAN-C	Delivery Date	260119
Inspection Date	260122	Inspection Time	9:00 PM
Lot Quantity	1500 PCS.	Job Order Number	JO-26-IPD-00010-1
Affected Quantity	52 PCS	Origin	<input checked="" type="checkbox"/> IN-HOUSE <input type="checkbox"/> SUPPLIER:
Rejection Rate and PPM	3.47% 34,667 PPM	Date Received	N/A
Sampling Quantity (IQA)	N/A	Detection (Section / Area)	SCREENING 3
Problem Description	MISALIGN PRINT DIECUT <i>JM</i>	Delivery Receipt Number	N/A

II. Visual Reference (Defect Illustration)

GOOD	NO GOOD
<p>NO MISALIGN PRINT</p> <p><i>DIECUT JM</i></p>	

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

<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-1032-01AB-03 WI-QA-001-010 JO-26-IPD-00010-1 AR2026-01-051 BROTHER DEFECT LIMIT	Requirement: NO MISALIGN PRINT DIECUT <i>JM</i> Actual: WITH MISALIGN-PRINT DIECUT <i>JM</i> Conclusion or Recommendation: REJECT	<input checked="" type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable
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IV. Initial Disposition (To be filled out by ME Department If Needed)

<input type="checkbox"/> Good <input type="checkbox"/> Rejected <input type="checkbox"/> Backload	<input type="checkbox"/> Conditional (Please indicate details)	<input checked="" type="checkbox"/> Rejected <input type="checkbox"/> Backload <input type="checkbox"/> Good <input type="checkbox"/> For Sorting <input type="checkbox"/> For Rework	<input type="checkbox"/> 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) <input checked="" type="checkbox"/> FOR 5 WHY ISSUANCE <input type="checkbox"/> FOR CAR ISSUANCE <input checked="" type="checkbox"/> FOR IRF ISSUANCE
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Detected by	Checked by	Initial Approved by (If Needed)	Approved by	Received By
<i>J. LAVADO</i>	<i>J. RELLORA</i>		<i>M. CASILLANO</i>	
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	Top Management	<input type="checkbox"/> Backload <input type="checkbox"/> Accept <input type="checkbox"/> Other _____

VII. Sorting Instructions

VIII. Sorting Details

Sorting Date	Sorting Time		No. of Manpower	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 Manpower	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 Manpower	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.

Am. 01-057

090


Kanepackage Philippine Inc.

PR-001-F12-REV

MEMO: IPD

Mary Grace Ubay
SO #: SO-26-IPD-00010

JOB ORDER

Customer : BROTHER INDUSTRIES (PHILS.), INC.	JOB ORDER:
ITEM CODE: D03FEE001.C1	 JO-26-IPD-00010-1A
Netsuite Itemcode: D03FEE001.C1	

Item Description : CARTON MFC-J5010DW US/CAN-C; A			
QTY: 1500	DELIVERY DATE: 2026-01-19	CREATED BY: JECHEL BALINGBING BUCE	DATE RELEASED: 2026-01-12

Raw Material Code:	Qty To Be Used:	Over Run:	Cut Size:	Actual Issued:	DR#:	SUPPLIER:
965X1153 CBF WKL220/TX175	1500	20	- None -	1465	1/26/2113	
965X1153 CBF WKL220/TX175	1500	20	- None -	1465	26/2413	TS
0						
0						
0						
0						
0						
0						
0						
0						
0						

Tooling Ref# - _____ Ctrl/Batch #: _____ RM Issued By: com 1/19

PROCESS / MACHINE	DATE	IN-CHARGE		GOOD QTY	TRIAL RUN		REJECTED QTY		REMARKS
		Operator	ME/QA		G	R	INHOUSE	SUPPLIER	
1. EQOS	1/19	EJAM	JAPP 1/19	*-1465 0-1465	G	R			
2. DIECUT S1700	1/21	JAM	Y. M. A	A-	G	R			Etarna
3. DETACHING 1	1-21	PS	KS	A-4,00 0-1465	G	R			
4. GLUING CONVEYOR 2	1/22	JM	Dulfine	433	G	R			
5. TRANSFER TO BOX STICKER	1-22	JRO	lead	240+100 KS	G	R			
6. Screening	01/21		J. Ultramas	1676 356	G	R	77		
7.	01-22		Jonal	152			4/2		
8.	01/21		J. Ultramas	493			4/2	10	
9.									

REJECTION/ ABNORMALITY HISTORY

Customer Claim:

Notes:

REMARKS BAL. 110 pcs.
 PROD PLAN: ADD #0 PLAN 2026-019

WHOUSE OUT
 DATE: 1/19



KANEPACKAGE PHILIPPINE INC.

SCREENING INSPECTION REPORT (CORRUGATED AND MOULDED ITEMS)

Control No.

SQB-01-000990

I. Item Information

Customer	BROTHER INDUSTRIES (PHILS.), INC.	Inspection Date	260121	Shift:	<input type="checkbox"/> Day <input checked="" type="checkbox"/> Night
Location	BATANGAS	Delivery Date	260119	Job Order No.	JO-26-IPD-00010-1A
Item Code	D03FEE001.C1	Job Order Qty.	1,500	Inspection Method	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> Sampling
Item Description	CARTON MFC-J5010DW EU/CAN-C;A	Delivery Receipt No.	262113/262443	Gluing Process	<input checked="" type="checkbox"/> Manual Gluing <input type="checkbox"/> Semi-Auto Gluing
Model	N/A	External Provider	TS		<input type="checkbox"/> SD1800
Drawing Revision No.	03				

II. Dimensional Inspection

Time Conducted Sample #1: 2:00			Time Conducted Sample #2: 5:00			Time Conducted Sample #3: 5:30					
Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3	Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3
1	543	±5	543	543	543	16					
2	517		517	517	517	17					
3	375		375	375	375	18					
4	240		240	240	240	19					
5	15		15	15	15	20					
6	68		68	68	68	21					
7	280		280	280	280	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: 25-23124-019

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	5		5	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	N			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)	6		6	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: <u>miss print</u>	3		3	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
Smear Print				Chip Off	N/A	N/A	N/A
Other Print Defect:				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: <u>blood stain</u>	6		6	Scratches	N/A	N/A	N/A
Excess Glue	7		7	Foreign Materials	N/A	N/A	N/A
Gluing Defect: <u>miss align glue</u>	8		8	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	3		3	Discoloration	N/A	N/A	N/A
Tear-off				Excess Flashes	N/A	N/A	N/A
Peel-off	5		5	Others:	N/A	N/A	N/A
Damages: <u>print</u>	2		2				
Others: <u>miss align print</u>	32		32				

SCREENING INSPECTION REPORT (CORRUGATED AND MOULDED ITEMS)

Joint Flap		Judgement		Type of Material			
Requirement	Actual	Good	No Good	Requirement	Actual	Good	No Good
GLUED (Inside or Outside)	inside made	—		Corrugated	WKL20	WKL20	✓
				Flute	CBSF	CBSF	✓
STITCHED (Inside or Outside)	N/A			Others	N/A		

IV. Destructive Test (Based on Customer Requirement)				V. Barcode Print (If Only with Printed Barcode on Item)			
Requirement	Actual	Good	No Good	Scan 1		<input type="checkbox"/> Good	<input type="checkbox"/> No Good
	N/A			Scan 2	N/A	<input type="checkbox"/> Good	<input type="checkbox"/> No Good
				BQICS Compliance (For Epson items only)			
				<input type="checkbox"/> Good <input type="checkbox"/> No Good			

VI. Inspection Result			VII. Sampling Inspection Result		
Total Qty Inspected	433	Defect Rate Formula: $\frac{\text{Total Qty. NG}}{\text{Total Qty. Inspected}} \times 100$ PPM Formula: $\frac{\text{Total Qty. NG}}{\text{Total Qty. Inspected}} \times 1,000,000$	Total Sampling Qty Inspected		Defect Rate in % in PPM
Total Qty Good	356		Total Sampling Qty Good		
Total Qty NG	77		Total Sampling Qty NG		
Defect Rate	17.78%		Defect Rate		
	177,829 PPM				

VIII. Disposition		IX. Remarks	
<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>AWC-01-051</u>			

Inspected by	Checked by	Approved by (If there are major concerns)	Verified by (If there are major concerns)
<i>J. L. ...</i> QA Screening Inspector	<i>[Signature]</i> QA Line Leader		
		QA Supervisor / QA Asst. Supervisor	QA Head

X. Reject & Reworks Item Verification			
Defect	Verification Quantity		Remarks:
	Good	No-Good	
Total			

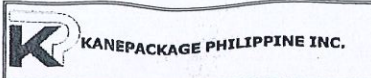
Verified by (Signature over Printed Name)

R&R Staff

Received by (Signature over Printed Name)

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



SCREENING INSPECTION REPORT (CORRUGATED AND MOULDED ITEMS)

Control No.
SQA-01-000995

I. Item Information

Customer	BROTHER INDUSTRIES (PHILS.), INC.	Inspection Date	26/02/22	Shift: <input type="checkbox"/> Day <input checked="" type="checkbox"/> Night
Location	Laguna	Delivery Date	260119	
Item Code	D03FEE001	Job Order No.	JO-26-IPD-00010-1	
Item Description	CARTON MFC-J5010DW US/CAN-C	Job Order Qty.	1,500	
Model	N/A	Inspection Method	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> Sampling	
Drawing Revision No.	03	Delivery Receipt No.	262443	
External Provider	TS	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: 8:40	Time Conducted Sample #2: 12:00	Time Conducted Sample #3: 5:30									
Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3	Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3
1	543	+5	543	543	543	16					
2	517		517	517	517	17					
3	375		375	375	375	18					
4	240		240	240	240	19					
5	15		15	15	15	20					
6	280		280	280	280	21					
7	68		68	68	68	22					
8						23					
9						24					
10						25					
11						26					
12						27					
13						28					
14						29					
15						30					

Measuring Tool Used: <input checked="" type="checkbox"/> Meter Tape	<input type="checkbox"/> Moisture Content Tester	<input type="checkbox"/> Zahn Cup	<input type="checkbox"/> Stopwatch	Control Number of Measuring Tool Used: 25-23177-019
<input type="checkbox"/> Thickness Gauge	<input type="checkbox"/> Weighing Scale	<input type="checkbox"/> Steel Ruler	<input type="checkbox"/> Caliper	

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	N			C. CORRUGATED PALLET			
Uneven Kraft liner				In-house	External Provider	Total Quantity	
Warpage				Color of Carton (Discoloration)	N/A	N/A	N/A
Cracking on edge				Flute of Material	N/A	N/A	N/A
Bursting / Bursting on Edge (Crowfeet)				Type of Adhesion	N/A	N/A	N/A
Wrong die-cut orientation				Adhesion of Runner	N/A	N/A	N/A
Inverted die-cut				Rusty Wire	N/A	N/A	N/A
Close Gap/ Wide Gap				Wrong Orientation	N/A	N/A	N/A
Print Color : _____				Damages: _____	N/A	N/A	N/A
Missing Print/ Character				Others : _____	N/A	N/A	N/A
Blotted Print				D. MOULDED ITEMS			
Smeared Print				In-house	External Provider	Total Quantity	
Other Print Defect : _____				Poor Fusion	N/A	N/A	N/A
Linemark				Chip Off	N/A	N/A	N/A
Fish-eye				Warp / Deform	N/A	N/A	N/A
Stain : <u>Bulging</u>	2		2	Crack	N/A	N/A	N/A
Excess Glue	4		4	Broken	N/A	N/A	N/A
Gluing Defect : <u>mis align glue</u>	6		6	Scratches	N/A	N/A	N/A
Worn-out				Foreign Materials	N/A	N/A	N/A
Dent				Wet / Moist	N/A	N/A	N/A
Punctured				Dirt	N/A	N/A	N/A
Tear-off	1		1	Stain : _____	N/A	N/A	N/A
Peel-off	11		11	Discoloration	N/A	N/A	N/A
Damages : <u>Dirt</u>	4		4	Excess Flashes	N/A	N/A	N/A
Others : <u>mis align print</u>	20		20	Others :	N/A	N/A	N/A



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)	inside	inside	-		Corrugated	WCL220	WCL220	-	
STITCHED (Inside or Outside)		N/A			Flute	CBF	CBF	-	
					Others				

IV. Destructive Test (Based on Customer Requirement)				V. Barcode Print (If Only with Printed Barcode on Item)			
Requirement	Actual	Good	No Good	Scan 1		<input type="checkbox"/> Good	<input type="checkbox"/> No Good
	N/A			Scan 2	N/A	<input type="checkbox"/> Good	<input type="checkbox"/> No Good
				BQICS Compliance (For Epson items only)			
				<input type="checkbox"/> Good <input type="checkbox"/> No Good			

VI. Inspection Result			VII. Sampling Inspection Result		
Total Qty Inspected	550		Total Sampling Qty Inspected		
Total Qty Good	493		Total Sampling Qty Good		
Total Qty NG	57		Total Sampling Qty NG		N/A
Defect Rate in %	10.36%		Defect Rate in %		
Defect Rate in PPM	103,636 PPM		Defect Rate in PPM		

VIII. Disposition		IX. Remarks	
<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>AWMM-01-051</u>			

Inspected by	Checked by	Approved by (If there are major concerns)	Verified by (If there are major concerns)
<i>J. Alvarez</i>	<i>May</i>		<i>[Signature]</i>
QA Screening Inspector	QA Line Leader	QA Supervisor / QA Asst. Supervisor	QA Head

X. Reject & Reworks Item Verification			
Defect	Verification Quantity		Remarks:
	Good	No-Good	
Total			

XI. Overall Inspection Time							
CORRUGATED AND MOULDED ITEMS							
Date	No. of Manpower	Qty	Time Start	Time End	Downtime	Total	Cause of Downtime