


**I. Item Information**

Item Code	00918237-01	Customer	SANYO DENKI
Item Description	PACKAGE	Delivery Date	260207
Inspection Date	260207	Inspection Time	3PM
Lot Quantity	1,050 PCS	Job Order Number	JO26-M-00124-20
Affected Quantity	<b>12 PCS</b>	Origin	<input checked="" type="checkbox"/> IN-HOUSE <input type="checkbox"/> SUPPLIER:
Rejection Rate and PPM	1.14% 11,429 PPM	Date Received	N/A
Sampling Quantity (IQA)	N/A	Detection (Section / Area)	SCREENING 3
Problem Description	POOR PRINT	Delivery Receipt Number	N/A

**II. Visual Reference (Defect Illustration)**

<b>GOOD</b>	<b>NO GOOD</b>
<b>NO POOR PRINT</b>	

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

Related Doc. Info.	Control Number	Requirement:	POOR PRINT NOT ACCEPTABLE
<input checked="" type="checkbox"/> Procedure Manual :	PM-QA-018	Actual:	WITH POOR PRINT (CLASS A)
<input checked="" type="checkbox"/> Technical Drawing :	SDP-0686-01		
<input checked="" type="checkbox"/> Work Instruction :	WI-QA-001-010		
<input checked="" type="checkbox"/> Job Order :	JO26-M-00124-20	Conclusion or Recommendation:	REJECT <input checked="" type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable
<input checked="" type="checkbox"/> Reports :	AR2026-02-021		
<input checked="" type="checkbox"/> Defect Limit :	SDP DEFECT LIMIT		

**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:	<b>JUDGEMENT</b> <small>(If subject is for issuance of IRF / CAR)</small> <input 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
E. SANTOS	A. FLIPINAS		M. CASILLANO	C. FLORES
QA Inspector	QA Line Leader	ME Head	QA Head	QA Staff

<b>Important: Backloading Policy (External Provider Rejects)</b> 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	Top Management	<input type="checkbox"/> Backload
	<input type="checkbox"/> >80% Need		<input type="checkbox"/> Accept
			<input type="checkbox"/> Other _____

# ABNORMALITY REPORT

**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		

C. PLORES

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

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**JOB ORDER**

MEMO:

LABAY, MENCHIE L.  
SO #: SO26-M-00124

Customer : SANYO DENKI PHILS INC		<b>JOB ORDER:</b>	
ITEM CODE: 00918237-01		JOM0067835	
NetSuite Itemcode: 00918237-01		KPSystem :	JO26-M-00124-20
Item Description : PACKAGE			
QTY: 1050	DELIVERY DATE: 2026-2-6	CREATED BY: Jhee Ann Mendonez	DATE RELEASED: 2026-2-4
Raw Material Code:	Qty To Be Used:	Over Run: Cut Size:	Actual Issued: DR#: SUPPLIER:
567X1699 CBF TX200-C	1050	20 N/A	1070 00001879 Jee

Tooling Ref# - \_\_\_\_\_ Ctrl/Batch #: \_\_\_\_\_ RM Issued By: Jan 2/6

PROCESS / MACHINE	DATE	IN-CHARGE		GOOD QTY	TRIAL RUN		REJECTED QTY		REMARKS
		Operator	ME/QA		G	R	INHOUSE	SUPPLIER	
1.EQOS	2/6	PAJE	JMP 2/6	1070	G	R			
2.GLUING SA 2600	2/6	JM Lamy		150+403	G	R			
3.LOT NUMBERING	02-06		RUON	400	G	R			
4.SCREENING	02/06 2/7		J. Santos E. Santos	150 400	G	R	28		
					G	R			
					G	R			
					G	R			

**REJECTION / ABNORMALITY HISTORY:**

Customer Claim:

Notes:

REMARKS:

50 to QA BEN 2/6  
163 to QA CA 2/7

**SANYO DENKI PHILIPPINES INC.**

Item Code	QUANTITY
00918237-01	10 pcs.
Item Description	Supplier's QC
PACKAGE	PASSED
Lot No. / Ref. No.	INSPECTION
260207 - 00124-20	RoHS OK
	QA-KP049

**KANEPACKAGE PHILIPPINES INC.**

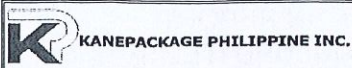
**WAREHOUSE**

NAME: [Signature] DATE: 2/6









## SCREENING INSPECTION REPORT (CORRUGATED AND MOULDED ITEMS)

Control No.  
**SQA-02-000422**

### I. Item Information

Customer	SANYO DENKI PHILS INC	Inspection Date	20207	Shift: <input checked="" type="checkbox"/> Day <input type="checkbox"/> Night
Location	North	Delivery Date	260206	
Item Code	00918237-01	Job Order No.	JO26-M-00124-20	
Item Description	PACKAGE	Job Order Qty.	1,050	
Model	N/A	Inspection Method	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> Sampling	
Drawing Revision No.	04	Delivery Receipt No.	0001879	
External Provider	PW	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: 08:07			Time Conducted Sample #2: 9:29			Time Conducted Sample #3: 10:27					
Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3	Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3
1	440	+/- 3	440	440	440	16					
2	372		372	372	372	17					
3	165		165	165	165	18					
4	26	+/- 1.5	26	26	26	19					
5	20		20	20	20	20					
6	40		40	40	40	21					
7	30		30	30	30	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:
	<input type="checkbox"/> Thickness Gauge	<input type="checkbox"/> Weighing Scale	<input type="checkbox"/> Steel Ruler	<input type="checkbox"/> Caliper	25-17049-091

### 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	8		8	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				<b>C. CORRUGATED PALLET</b>			
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				<b>D. MOULDED ITEMS</b>			
Smearred Print				In-house	External Provider	Total Quantity	
Other Print Defect : <u>Poor print</u>	12		12	Poor Fusion	N/A	N/A	N/A
Linemark				Chip Off	N/A	N/A	N/A
Fish-eye	1		1	Warp / Deform	N/A	N/A	N/A
Stain : _____				Crack	N/A	N/A	N/A
Excess Glue	3		3	Broken	N/A	N/A	N/A
Gluing Defect : _____				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	2		2	Dirt	N/A	N/A	N/A
Tear-off				Stain : _____	N/A	N/A	N/A
Peel-off				Discoloration	N/A	N/A	N/A
Damages :				Excess Flashes	N/A	N/A	N/A
Others : <u>bird stain</u>	2		2	Others :	N/A	N/A	N/A

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