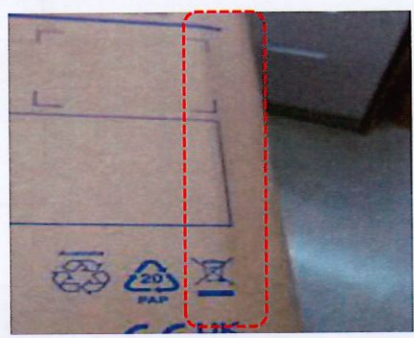




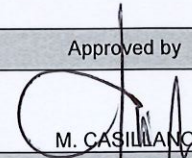

I. Item Information			
Item Code	D02X6G001	Customer	BROTHER
Item Description	PRN CARTON (X) E110 EU	Delivery Date	260217
Inspection Date	260217	Inspection Time	2PM
Lot Quantity	1,300 PCS	Job Order Number	
Affected Quantity	45 PCS	Origin	<input checked="" type="checkbox"/> IN-HOUSE <input type="checkbox"/> SUPPLIER:
Rejection Rate and PPM	3.46% 34,615 PPM	Date Received	N/A
Sampling Quantity (IQA)	N/A	Detection (Section / Area)	SCREENING 2
Problem Description	EXTRA FOLD	Delivery Receipt Number	N/A

II. Visual Reference (Defect Illustration)	
<h2 style="margin:0;">GOOD</h2>	<h2 style="margin:0;">NO GOOD</h2>
<h1 style="margin:0;">NO EXTRA FOLD</h1>	

III. Documented Information Review (To be filled out by Qa Line Leader)			
Related Doc. Info.	Control Number	Requirement:	EXTRA FOLD NOT ACCEPTABLE
<input checked="" type="checkbox"/> Procedure Manual :	PM-QA-018	Actual:	WITH EXTRA FOLD (END TO END)
<input checked="" type="checkbox"/> Technical Drawing :	BIP-0596-01		
<input checked="" type="checkbox"/> Work Instruction :	WI-QA-001-010	Conclusion or Recommendation:	REJECT <input checked="" type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable
<input checked="" type="checkbox"/> Job Order :	12:00 AM		
<input checked="" type="checkbox"/> Reports :	AR2026-02-045		
<input checked="" type="checkbox"/> Defect Limit :	BIPH 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, <table border="1" style="width:100%; border-collapse: collapse; margin-top: 5px;"> <tr> <th style="width:30%;">Person In Charge</th> <th style="width:20%;">Target Date</th> <th style="width:50%;">Signature</th> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Person In Charge	Target Date	Signature									
Person In Charge	Target Date	Signature													
<input type="checkbox"/> Backload		<input type="checkbox"/> Good													
		<input type="checkbox"/> For Sorting													
		<input type="checkbox"/> For Rework													

Remarks:	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">JUDGEMENT <small>(If subject is for issuance of IRF / CAR)</small></th> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>FOR 5 WHY ISSUANCE</td> </tr> <tr> <td><input type="checkbox"/></td> <td>FOR CAR ISSUANCE</td> </tr> <tr> <td><input type="checkbox"/></td> <td>FOR IRF ISSUANCE</td> </tr> </table>	JUDGEMENT <small>(If subject is for issuance of IRF / CAR)</small>		<input checked="" type="checkbox"/>	FOR 5 WHY ISSUANCE	<input type="checkbox"/>	FOR CAR ISSUANCE	<input type="checkbox"/>	FOR IRF ISSUANCE
JUDGEMENT <small>(If subject is for issuance of IRF / CAR)</small>									
<input checked="" type="checkbox"/>	FOR 5 WHY ISSUANCE								
<input type="checkbox"/>	FOR CAR ISSUANCE								
<input type="checkbox"/>	FOR IRF ISSUANCE								

Detected by	Checked by	Initial Approved by (If Needed)	Approved by	Received By
 J. TABOT	 A. FILIPINAS		 M. CASILLANO	 C. FLORES
QA Inspector	QA Line Leader	ME Head	QA Head	QA Staff

<p>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.</p>	Evaluation <input type="checkbox"/> <80% No Need <input type="checkbox"/> >80% Need	Approved by Top Management	Final Disposition <input type="checkbox"/> Backload <input type="checkbox"/> Accept <input type="checkbox"/> Other _____
---	---	-------------------------------	---

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
<input type="checkbox"/> Pull-Out			
<input type="checkbox"/> 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		

AWARD ①

D26

1107

KANEPACKAGE PHILIPPINE INC.

PR-001-F12-REV.00

MEMO:

JOB ORDER

MANAIG, RHEA V.
SO #: SO26-M-00114

Customer :	BROTHER INDUSTRIES (PHILS.), INC.	JOB ORDER: JOM0068655 KPSYSTEM : JO26-M-00114-7
ITEM CODE:	D02X6G001	
NetSuite Itemcode:	D02X6G001	

Item Description : PRN CARTON (X3) E110 EU COC (FSC Mix, FSC No.: TSUD-COC-002308)			
QTY:	DELIVERY DATE:	CREATED BY:	DATE RELEASED:
1300	2026-2-16	Jhee Ann Mendonez	2026-2-11

Raw Material Code:	Qty To Be Used:	Over Run:	Cut Size:	Actual Issued:	DR#:	SUPPLIER:
35x1062 CF JPK200-SC	1300	20	N/A	1320	227376	QCB

Rolling Ref# - 30-27 John Ctrl/Batch #: _____ RM Issued By: cy 2/14

PROCESS / MACHINE	DATE	IN-CHARGE		GOOD QTY	TRIAL RUN		REJECTED QTY		REMARKS
		Operator	ME/QA		G	R	INHOUSE	SUPPLIER	
EQOS	2/14	EMYPR	JCU	1320	G	R			
DIECUT S1700-2	2/14	JHE/JOMINE		1320	G	R			
GLUING SD 1800	2/16	Rec Nelson (LOW)		1278	G	R	42		
LOT NUMBERING	2/16		ERIC ma	500 800	G	R			
SCREENING	2/16		ERIC EPERE	500	G	R			
	2/17		JAM	730	G	R	48		
					G	R			
					G	R			

REJECTION / ABNORMALITY HISTORY:

Customer Claim:

Notes:

REMARKS:

PRODUCTION OUT

Bow 2/16

KPSYSTEM

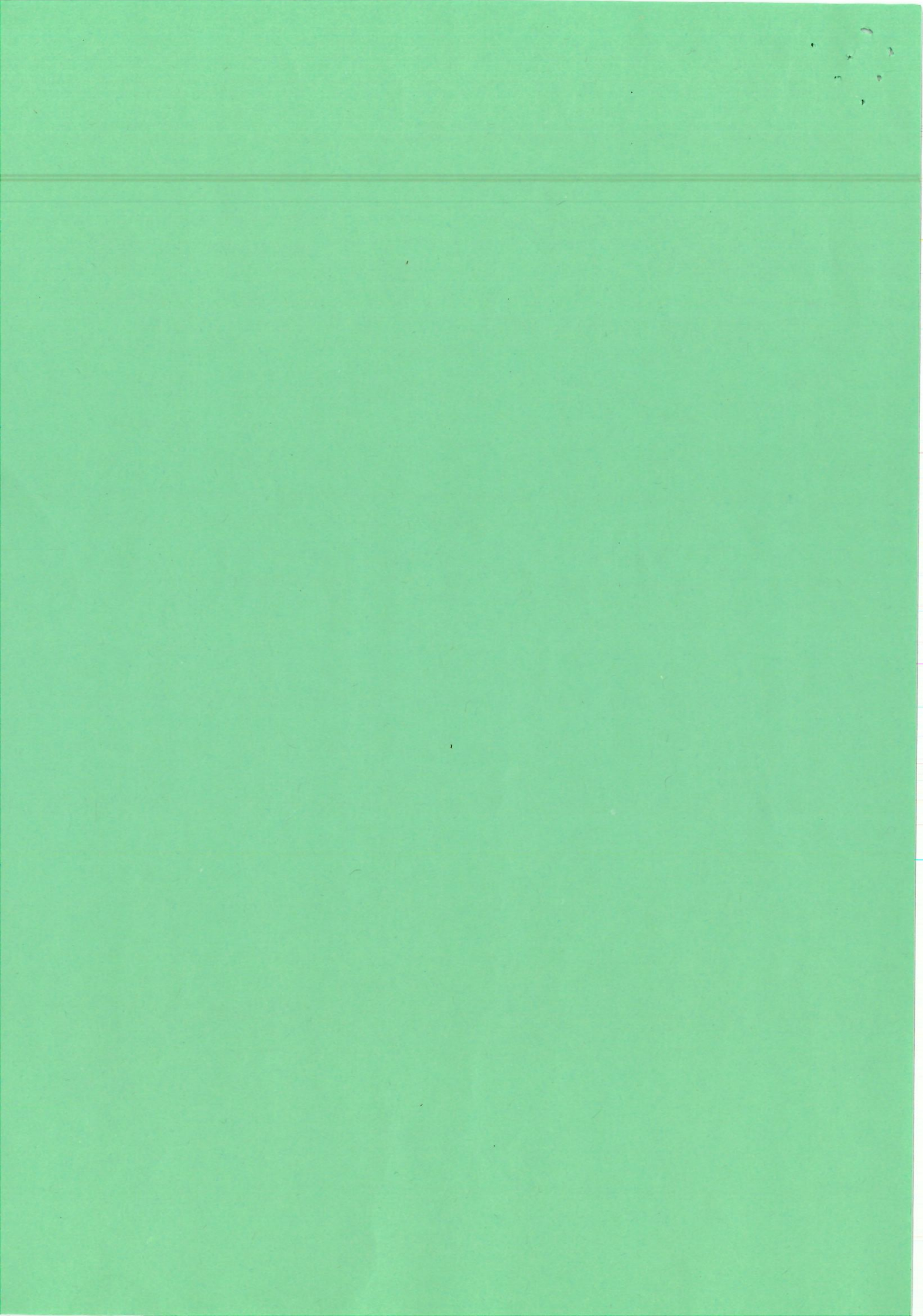
NAME: [Signature] DATE: 2/14

K KANEPACKAGE PHILIPPINES INC.	
Part Code	D02X6G001
Part Name	PRN CARTON (X3) E110 EU COC
Production Date	280217
Lot Number	JO26-M-00114-7
Quantity	10 pcs.
P.O.	N/A
Mold No./Cavity	N/A
Operator	QA-CG1026
Remarks	MP



STAMP

STAMP



SCREENING INSPECTION REPORT (CORRUGATED AND MOULDED ITEMS)

Control No.
SQB-02-001107

I. Item Information

Customer	BROTHER INDUSTRIES (PHILS.), INC.	Inspection Date	260217	Shift: <input checked="" type="checkbox"/> Day <input type="checkbox"/> Night
Location	BATANGAS	Delivery Date	260216	
Item Code	D02X6G001	Job Order No.	JO26-M-00114-7	
Item Description	PRN CARTON (X3) ETTU ED CUC (FSC MIX, FSC NO-TSLD-COC-002308)	Job Order Qty.	1,300	
Model	N/A	Inspection Method	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> Sampling	
Drawing Revision No.	04	Delivery Receipt No.	227376	
External Provider	BCD	Gluing Process	<input type="checkbox"/> Manual Gluing <input type="checkbox"/> Semi-Auto Gluing <input type="checkbox"/> SD1800	

II. Dimensional Inspection

Time Conducted Sample #1: 10:00			Time Conducted Sample #2: 10:05			Time Conducted Sample #3: 10:15					
Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3	Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3
1	279	±3	279	280	279	16					
2	200		200	199	199	17					
3	277		277	276	278	18					
4	170.5	±5	170	175	173	19					
5	252.5		252	253	253	20					
6	90		90	91	95	21					
7	40		40	42	39	22					
8	3		3	3	3	23					
9						24					
10						25					
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: 210391-180

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		
Scoring									
Grain Direction									
Paper Shade (Off Color)									
Bubbles									
Blister									
Wrinkle									
Delamination									
Uneven Kraft liner									
Warpage									
Cracking on edge									
Bursting / Bursting on Edge (Crowfeet)									
Wrong die-cut orientation									
Inverted die-cut									
Close Gap/ Wide Gap									
Print Color									
Missing Print/ Character									
Blotted Print									
Smearred Print									
Other Print Defect: <u>POX PRINT</u>	1						1		
Litermark									
Fish-eye									
Stain									
Excess Glue									
Gluing Defect									
Worn-out									
Dent									
Punctured									
Tear-off									
Peel-off									
Damages									
Others: <u>EXTRA FOLD</u>	45						45		

(40) (40)

