

I. Item Information

Item Code	D03MBD001	Customer	BROTHER
Item Description	CARTON SHEET M21	Delivery Date	260227
Inspection Date	260226	Inspection Time	2AM
Lot Quantity	2,000 PCS	Job Order Number	JO26-M-00329-155
Affected Quantity	55 PCS	Origin	<input type="checkbox"/> IN-HOUSE <input checked="" type="checkbox"/> SUPPLIER: SUNPACK
Rejection Rate and PPM	2.75% 27,500 PPM	Date Received	260225
Sampling Quantity (IQA)	N/A	Detection (Section / Area)	PRODN ETERNA
Problem Description	SCORING	Delivery Receipt Number	375050

II. Visual Reference (Defect Illustration)

GOOD	NO GOOD								
<p>Defect SCORING</p> <table border="1"> <thead> <tr> <th>CLASS</th> <th>KANEPACKAGE PROPOSAL</th> <th>BIPH JUDGMENT</th> </tr> </thead> <tbody> <tr> <td>A</td> <td rowspan="3"> >1pc of light scoring Regardless of size (No Whitening; No Damaged Text & Images) </td> <td rowspan="3"> SAME as KPPJ Judgement </td> </tr> <tr> <td>B</td> </tr> <tr> <td>C</td> </tr> </tbody> </table>	CLASS	KANEPACKAGE PROPOSAL	BIPH JUDGMENT	A	>1pc of light scoring Regardless of size (No Whitening; No Damaged Text & Images)	SAME as KPPJ Judgement	B	C	
CLASS	KANEPACKAGE PROPOSAL	BIPH JUDGMENT							
A	>1pc of light scoring Regardless of size (No Whitening; No Damaged Text & Images)	SAME as KPPJ Judgement							
B									
C									

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

Related Doc. Info. <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-1051-01 WI-QA-001-010 JO26-M-00329-155 AR2026-02-065 BIPH DEFECT LIMIT	Requirement: 1 PC LIGHT SCORING ACCEPTABLE. NO WHITENING, DAMAGE TEXT Actual: WITH SCORING & WHITENING ON TEXT	Conclusion or Recommendation: REJECT <input checked="" type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable
---	---	---	--

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 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. ESPINOZA	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 <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 _____
--	---	-------------------------------	---

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		

12

4

7

1000 Juhre
9/10

1646

KANEPACKAGE PHILIPPINE INC.

PR-001-F12-REV.00

MEMO:

JOB ORDER

MANAIG, RHEA V.
SO #: SO26-M-00329

Customer : BROTHER INDUSTRIES (PHILS.), INC.	JOB ORDER: JOM0069683 KPSystem : JO26-M-00329-155
ITEM CODE: D03MBD001 2 OUTS	
NetSuite Itemcode: D03MBD001 2 OUTS	



Item Description : CARTON SHEET M21 (REVISED BLADE, CYREL, MATERIAL)

QTY: 2000	DELIVERY DATE: 2026-2-27	CREATED BY: Jhee Ann Mendonez	DATE RELEASED: 2026-2-23
-----------	--------------------------	-------------------------------	--------------------------

Raw Material Code: 1176X708 CBF TX140	Qty To Be Used: 1000	Over Run: 5	Cut Size: N/A	Actual Issued: 1005	DR#: 395050	SUPPLIER: SP
---------------------------------------	----------------------	-------------	---------------	---------------------	-------------	--------------

Tooling Ref# - 21-36 Ctrl/Batch #: _____ RM Issued By: cy 2/25

PROCESS / MACHINE	DATE	IN-CHARGE		GOOD QTY	TRIAL RUN		REJECTED QTY INHOUSE SUPPLIER	REMARKS
		Operator	ME/QA		G	R		
1.EQOS	2/25	FWTE	7/25	1005	G	R		
2.DIECUT S1700	2/25	WJRI		1003	G	R		
3.DETACHING				strip	G	R		
4.LOT NUMBERING	2/25		ona	2000	G	R		
5.SCREENING	2/25		foray jes mel	1010	G	R	90	
					G	R		
					G	R		
					G	R		

REJECTION / ABNORMALITY HISTORY:

Customer Claim:	 	
Notes:		
REMARKS: 321 513 pcs 2/24		

KANEPACKAGE PHILIPPINES INC.	
Part Code	D03MBD001
Part Name	CARTON SHEET M21
Production Date	280225
Lot Number	JO26-M-00329-155
Quantity	20 pcs.
P.O.	N/A
Mold No./Cavity	N/A
Operator	QA-CG6126
Remarks	MP



KANEPACKAGE PHILIPPINE INC.

SCREENING INSPECTION REPORT (CORRUGATED AND MOULDED ITEMS)

Control No.

SQB-02-001646

I. Item Information

Customer	BROTHER INDUSTRIES (PHILS.), INC.	Inspection Date	2/20/23	Shift:	<input type="checkbox"/> Day <input checked="" type="checkbox"/> Night
Location	BATANGAS	Delivery Date	260227		
Item Code	D03MBD001 2 OUTS	Job Order No.	JO26-M-00329-155		
Item Description	CARTON SHEET M2T (REVISED BLADE CYREL MATERIAL)	Job Order Qty.	2,000		
Model	N/A	Inspection Method	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> Sampling		
Drawing Revision No.	00	Delivery Receipt No.	375050		
External Provider	CP	Gluing Process	<input type="checkbox"/> Manual Gluing <input type="checkbox"/> Semi-Auto Gluing <input type="checkbox"/> SD1800		

II. Dimensional Inspection

Time Conducted Sample #1: 00:00			Time Conducted Sample #2: 00:30			Time Conducted Sample #3: 01:10					
Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3	Checkpoints	Drawing Specs	Tolerance	Sample #1	Sample #2	Sample #3
1	6.18	± 0.5	6.0	6.1	6.2	16					
2	5.0		5.0	5.1	5.2	17					
3	2.67		2.6	2.7	2.8	18					
4	3.0		3.1	3.0	3.0	19					
5						20					
6						21					
7						22					
8						23					
9						24					
10						25					
11						26					
12						27					
13						28					
14						29					
15						30					

Measuring Tool Used:	<input 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	25-25085-003

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		55	55	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				Furnigation Stamp	N/A	N/A	N/A
Blister				Crack/ Damages	N/A	N/A	N/A
Wrinkle	15			Others	N/A	N/A	N/A
Delamination		5	5	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	2		2	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			
Smearred 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 / Oil stain	15		15	Warp / Deform	N/A	N/A	N/A
Stain : _____				Crack	N/A	N/A	N/A
Excess Glue				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	4		4	Wet / Moist	N/A	N/A	N/A
Punctured	9		9	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 : _____				Others : _____	N/A	N/A	N/A

