

ABNORMALITY REPORT

Control No.

AR2026-03-025

I. Item Information

Item Code	DB08005110-01A	Customer	HIBLOW
Item Description	80-XP BOX W/INSERT PRINT	Delivery Date	260309
Inspection Date	260310	Inspection Time	7:00 AM
Lot Quantity	4,437 PCS	Job Order Number	JO-26-IPD-00238-1
Affected Quantity	131 PCS	Origin	<input checked="" type="checkbox"/> IN-HOUSE <input type="checkbox"/> SUPPLIER:
Rejection Rate and PPM	2.95% 29,524 PPM	Date Received	N/A
Sampling Quantity (IQA)	N/A	Detection (Section / Area)	SCREENING 2
Problem Description	POOR PRINT	Delivery Receipt Number	N/A

II. Visual Reference (Defect Illustration)

GOOD	NO GOOD
<p>NO POOR PRINT</p>	

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

Related Doc. Info.	Control Number	Requirement:	NO POOR PRINT
<input checked="" type="checkbox"/> Procedure Manual :	PM-QA-018	Actual:	WITH POOR PRINT
<input checked="" type="checkbox"/> Technical Drawing :	HPI-0127-01AB-08		
<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 :	JO-26-IPD-00238-1		
<input checked="" type="checkbox"/> Reports :	AR2026-03-025		
<input checked="" type="checkbox"/> Defect Limit :	HIBLOW 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:	JUDGEMENT <i>(If subject is for issuance of IRF / CAR)</i>
	<input type="checkbox"/> FOR 5 WHY ISSUANCE
	<input type="checkbox"/> FOR CAR ISSUANCE
	<input checked="" type="checkbox"/> FOR IRF ISSUANCE

Detected by	Checked by	Initial Approved by (If Needed)	Approved by	Received By
 J.E. RIVERA QA Inspector	 J. RELLORA QA Line Leader		 M. CASILLANO QA Head	

<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	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 _____

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.

600
500 } WHITE
590

500 - Mackie
600 } WHITE
470

567

KANEPACKAGE PHILIPPINE INC.

PR-001-F12-REV.00

JOB ORDER

MEMO:

RODOLFO, JAVIER TO JR.
SO #: SO-26-IPD-00238

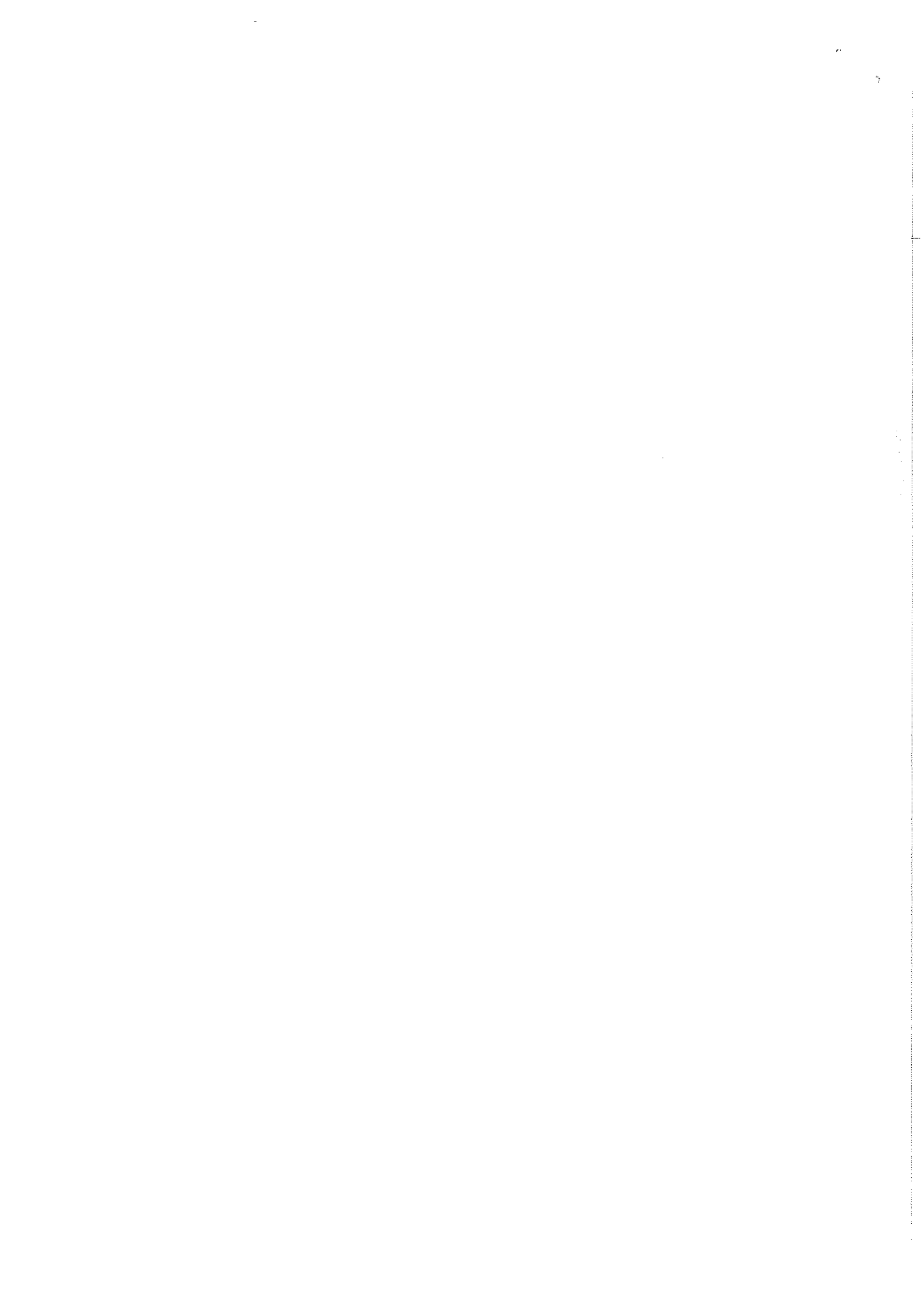
Customer : HIBLOW PHILIPPINES INC		JOB ORDER:	
ITEM CODE: DB08005110-01A	JOM0070772		
NetSuite Itemcode: DB08005110-01A	KPSYSTEM : JO-26-IPD-00238-1		
Item Description : 80-xp box w/ insert pad			
QTY: 5000	DELIVERY DATE: 2026-3-9	CREATED BY: SHARLOTTE NICOLE JAVIER	DATE RELEASED: 2026-3-5
Raw Material Code: 615X1025 CF TX200	Qty To Be Used: 5000	Over Run: 20	Cut Size: N/A
		Actual Issued: 4428	DR#: 7776
			SUPPLIER: 818

Tooling Ref# - EQ-23-216 Ctrl/Batch #: _____ RM Issued By: ey 3/c

PROCESS / MACHINE	DATE	IN-CHARGE		GOOD QTY	TRIAL RUN		REJECTED QTY		REMARKS
		Operator	ME/QA		G	R	INHOUSE	SUPPLIER	
1.EQOS	03/06	PAJE	2013/06	4478	G	R			wash board cost of poor print
2.DIECUT ETERNA	03/07	Chern	Josiah 03/06	1000 2458	G	R			
3.DETACHING 1	03/07	MANABAY Day shift		900 1800 3570 1787	G	R			
4.GLUING SD 1800 Gen 2.16207	3/07	Gloria Rhea	Edwin Ester Rochel M, J, R, J	1705 1770 962	G	R			CONVI. 7/10
5.LOT NUMBERING	3/9		JHJ ana	1000 1100 90 + 1000 500	G	R			
6.SCREENING	3/9		ERIC	1090	G	R	15		
	3/9		ERIC	1000	G	R			
	3/10		ERIC	1,070	G	R	200		

Customer Claim:	REJECTION / ABNORMALITY HIBLOW PHILIPPINES INC Item Code: DB08005110-01A Quantity: 10 pcs. Item Description: 80-XP OUTER BOX W/ INSERT PAD Lot No. / Ref. NO.: 260309-00238-1 Supplier's QC: PASSED INSPECTION RoHS OK QA: KP1618 MADE IN THE PHILIPPINES IPD KANEPACKAGE PHILIPPINE INC.		HIBLOW PHILIPPINES INC. Item Code: DB08005110-01A Quantity: 10 pcs. Item Description: 80-XP OUTER BOX W/ INSERT PAD Lot No. / Ref. NO.: 260310-00238-1 Supplier's QC: PASSED INSPECTION RoHS OK QA-CG6125 MADE IN THE PHILIPPINES IPD KANEPACKAGE PHILIPPINE INC.
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REMARKS: BAL. 59;
1705 to QA 02/09
1770 to QA 02/09



I. Item Information

Customer	BIBLOW PHILIPPINES INC	Inspection Date	2/20/10	Shift	<input checked="" type="checkbox"/> Day <input type="checkbox"/> Night
Location	FCIE	Delivery Date	260309	Job Order No.	JO-26-IPD-00238-1
Item Code	DB09005110-01A	Job Order Qty.	5,000	Inspection Method	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> Sampling
Item Description	80-xp box w/ insert pad	Delivery Receipt No.	71746	Gluing Process	<input type="checkbox"/> Manual Gluing <input type="checkbox"/> Semi-Auto Gluing
Model	N/A	External Provider	818		<input type="checkbox"/> SD1800
Drawing Revision No.	08				

II. Dimensional Inspection

Sample	Drawing Specs	Tolerance	Inner Dimension			Other Critical Dimension			Printing Movement	Handhole
			Length	Width	Height	Length	Width	Height		
1	205	±3	205	134	134	N		A		
2	134		205	134	134					
3	205		205	134	134					
4	494	±5				494	494	494		
5	584					584	584	584		
6	232					232	232	232		
7	137					137	137	137		
8	136					136	136	136		
9	29								29	29
10	51							43	43	
11	43							29	29	
12	29							10	10	
13	10									
14										
15										
16										
17										
18										
19										
20										

Measuring Meter Tape Control Number: 25-2504000 Moisture Content Tester Zahn Cup Stopwatch
 Tool Used: Thickness Gauge Weighing Scale Steel Ruler 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	6		6	Condition of Wood			
Grain Direction				Rusty Nail	N		
Paper Shade (Off Color)				Warping			
Bubbles				Fumigation Stamp			
Blisters				Crack/Damages			A
Winkles				Others			
Delamination				C. CORRUGATED PALLET	In-house	External Provider	Total Quantity
Uneven Kraft liner				Color of Carton (Discoloration)			
Warpage				Flute of Material	N		
Cracking on edge				Type of Adhesion			
Bursting / Bursting on Edge (Crowfeet)				Adhesion of Runner			
Wrong die-cut orientation				Rusty Wire			
Inverted die-cut				Wrong Orientation			A
Close Gap/ Wide Gap				Damages:			
Print Color:				Others:			
Missing Print/ Character				D. MOULDED ITEMS	In-house	External Provider	Total Quantity
Blotted Print				Poor Fusion			
Smear Print	131		131	Chip Off			
Other Print Defect	56		56	Warp / Deform	N		
Linemark				Crack			
Fish-eye				Broken			
Stain: Dil. stain	5		5	Scratches			
Excess Glue	6		6	Foreign Materials			
Gluing Defect: Bird stain	3		3	Wet / Moist			
Worn-out				Dirt			
Dent				Stain:			
Punctured				Discoloration			
Tear-off				Excess Flashes			
Peel-off				Others:			
Damages:							
Others:							

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KANE PACKAGE 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	TS00	TS00	/
STITCHED (Inside or Outside)				Flute	CF	CF	/
				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	Scan 2	<input type="checkbox"/> Good	<input type="checkbox"/> No Good
			D				
VI. Inspection Result				VII. Sampling Inspection Result			
Total Qty Inspected	2,232	PPM Formula:		Total Sampling Qty Inspected			
Total Qty Good	2,023	Total Qty. NG		Total Sampling Qty Good	/		
Total Qty NG	209	Total Qty. Inspected x 1,000,000		Total Sampling Qty NG	/		
Defect Rate (PPM)	93.7	1,025,419,970		Defect Rate (PPM)	/		
VIII. Disposition				IX. Remarks			
<input 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"/>						
<input type="checkbox"/> For Rework	Abnormality Report Control No.: AR2024-63-028/0211						
<input type="checkbox"/>							
Inspected by	Checked by	Approved by (If there are major concerns)	Verified by (If there are major concerns)				
J. R. NERB	J. R. NERB						
QA Screening Inspector	QA Line Leader	QA Senior IE Staff	QA Head				
X. Reject & Reworks Item Verification							
Defect	Verification Quantity		Remarks:	Verified by (Signature over Printed Name)			
	Good	No-Good					
Total				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