

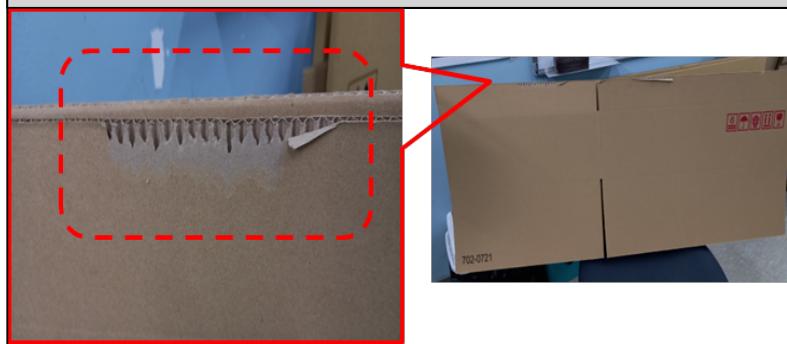
**KANE PACKAGE PHILIPPINE INC.**

No. 5 Ring Road LISI II, Brgy. La Mesa, Calamba City, Laguna
 Telephone No. (049) 5457-7166 to 69
 Fax No. (049) 545-6302

INVESTIGATION REPORT FORM (IRF)

| | |
|--------------|-------------|
| Control No.: | Date Issued |
| 0022 | 241026 |

| | | | |
|------------------|-------------------------------|-------------------|--------------|
| Customer | DENSO PHILIPPINES CORPORATION | Attention To | WEENA APALLA |
| Item Code | PH989702-0721 | Department | PRODUCTION |
| Item Description | BOX | Date of Detection | 241019 |
| Job Order Number | JO24-M-01754-12 | Section Detected | QA SCREENING |

ILLUSTRATION OF THE PROBLEM

| | | |
|--------------------|------------------|----------|
| Lot Quantity (pcs) | Reject Qty (pcs) | Reject % |
| 735 | 50 | 6.80 |

Nature of Defect:

PEEL OFF

Requirement:

Acceptable up to 25mm only

Actual

With peel off more than 25mm

| NO. OF OCCURENCE | DISPOSITION | AREA OF OCCURENCE / ORIGIN | CONTENT |
|--|---|--|--|
| <input type="checkbox"/> First | <input type="checkbox"/> Hold | <input type="checkbox"/> Slotter | <input type="checkbox"/> Material |
| <input checked="" type="checkbox"/> Recurrence No.: <u>2</u> | <input type="checkbox"/> Special Acceptance | <input checked="" type="checkbox"/> EQOS | <input type="checkbox"/> Dimension |
| Date.: <u>241016</u> | <input type="checkbox"/> For Rework | <input type="checkbox"/> Diecut | <input type="checkbox"/> Appearance |
| | <input checked="" type="checkbox"/> Reject / Disposal | <input type="checkbox"/> Detaching | <input checked="" type="checkbox"/> Process / Method |
| Issued by | Checked by | Approved by | Received by (Receiving Section) |
| LESTER JOHN DIOSO 241026 | CHARLENE JAN MARIE FLORES 241026 | MICHAEL CASILLANO 241028 | GERALD DE GUZMAN 241128 |

I. INVESTIGATION / ANALYSIS**DIRECT CAUSE: (Analyze the reason of occurrence, why it happened?)**

System / Training

Design / Toolings

Process / Material



INDIRECT CAUSE: (Analyze the reason of occurrence, why it leaked?)

System / Training

Design / Toolings

Process / Material

FINAL CONCLUSION

CORRECTIVE ACTION: (Actions to be done to ensure that the problem will not happen again)

WHO / WHEN

IMMEDIATE ACTION: (Action to be done to contain/ temporary correct the problem found)

| A. Sorting Result | | | | | C. Reworking | |
|-------------------|----------|-------------|----|------------|-------------------|-----|
| | Location | Total Stock | NG | Total Good | Rework Quantity | n/a |
| RM | n/a | 0 | 0 | 0 | Total Good | 0 |
| WIP | n/a | 0 | 0 | 0 | | |
| FG | n/a | 0 | 0 | 0 | Rework PPM (Good) | 0 |

B. Orientation

| | | | |
|---------------------------|------------|------------------------|-------|
| Date | 2025-01-10 | Time | 23:22 |
| Title | n/a | | |
| Attendees | n/a | | |
| Prepared By: | | Approved By: | |
| GERALD DE GUZMAN 250128 | | REXEL ALMARIO 250205 | |
| | | Department Head | |

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INVESTIGATION REPORT FORM (IRF)**II. QA ROOTCAUSE VERIFICATION (To be filled out by QA In-charge)**

| | |
|----------------------|----------------|
| Date Conducted: | PIC: |
| Identified Rootcause | Recommendation |

III. CORRECTIVE ACTION VERIFICATION (To be filled out by QA In-charge)

| | Checked By: | Date | Implemented? | Running | JO Number | Date | NG Qty | Lot Qty |
|----------------------------|-------------|------|--|---------|-----------|------|--------|---------|
| 1st Verification of Action | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | 1st | | | | |
| 2nd Verification of Action | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | 2nd | | | | |
| 3rd Verification of Action | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | 3rd | | | | |
| Effectiveness of Action | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | 4th | | | | |
| Remarks: | | | | 5th | | | | |

IV. CLOSURE

| Status | Remarks | | | |
|--|--|---|---|----------------------|
| Closed IRF | Peel off re-occurred last February 13, 2025, with 20pcs. NG/ 500pcs. Already re-issued IRF (IRF#0059). | | | |
| Approved by: | | Process Owner Acknowledgment: (Receiving Section) | | |
| MICHAEL CASILLANO 250303 10:22 QA Head | KOHEI ISHII 250304 02:24 Top Management | GERALD DE GUZMAN 250318 03:35 Line Leader | REXEL ALMARIO 250507 11:24 Department Head | |
| Date: 25252525-03-03 | Date: 25252525-03-04 | Date: 25252525-03-18 | | Date: 25252525-05-07 |