

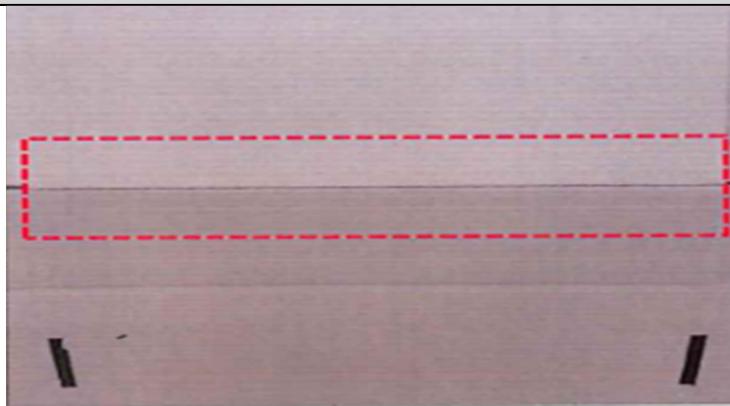
**KANE PACKAGE PHILIPPINE INC.**

No. 5 Ring Road LISP 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 |
| 0026 | 241109 |

| | | | |
|------------------|--------------------------|-------------------|--------------|
| Customer | SUPERFLEX LOGISTICS, INC | Attention To | WEENA APALLA |
| Item Code | PKG-PRO-31-RMFG | Department | PRODUCTION |
| Item Description | A585 BOX | Date of Detection | 241104 |
| Job Order Number | JO-24-IPD-01012-1 | Section Detected | QA SCREENING |

ILLUSTRATION OF THE PROBLEM

| | | |
|--------------------|------------------|----------|
| Lot Quantity (pcs) | Reject Qty (pcs) | Reject % |
|--------------------|------------------|----------|

| | | |
|-----|----|-------|
| 100 | 25 | 25.00 |
|-----|----|-------|

Nature of Defect:

OVER CUT

Requirement:

Should be creasing line

Actual

Overcut on creasing line

ACTUAL: Overcut

REQUIREMENT: No overcut

| NO. OF OCCURENCE | DISPOSITION | AREA OF OCCURENCE / ORIGIN | CONTENT |
|---|---|--|--|
| <input checked="" type="checkbox"/> First | <input type="checkbox"/> Hold | <input type="checkbox"/> Slotter | <input type="checkbox"/> Material |
| <input type="checkbox"/> Recurrence No.: <u>1</u> | <input type="checkbox"/> Special Acceptance | <input type="checkbox"/> EQOS | <input type="checkbox"/> Dimension |
| Date.: <u>241104</u> | <input type="checkbox"/> For Rework | <input checked="" 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 241109 | CHARLENE JAN MARIE FLORES 241111 | MICHAEL CASILLANO 241112 | 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 | 2024-12-20 | Time | 23:38 |
| 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: 2025-02-28 | PIC: L. Dioso |
| Identified Rootcause Actual installed creasing blade height was 23.3mm, while the cutting blade height was 23.8mm, giving a minimal height difference of 0.5mm, making it prone to overcut. | Recommendation Replacement of creasing blades. |

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 | L. Dioso | 2025-02-28 | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | 1st | JO25-M-00802-1 | 250228 | 0 | 100 |
| 2nd Verification of Action | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 2nd | | | | |
| 3rd Verification of Action | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 3rd | | | | |
| Effectiveness of Action | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 4th | | | | |
| Remarks: Blade adjustment was implemented. Item is slow moving product with only one-active running. | | | | 5th | | | | |

IV. CLOSURE

| Status | Remarks | | | |
|--|---|---|---|--|
| Closed IRF | PKG-PRO-31-RMFG A585 BOX is a slow-moving item with only one recorded production run. | | | |
| Approved by: | | Process Owner Acknowledgment: (Receiving Section) | | |
| MICHAEL CASILLANO 250424 08:02 QA Head | KOHEI ISHII 250425 09:51 Top Management | GERALD DE GUZMAN 250506 02:30 Line Leader | REXEL ALMARIO 250507 11:24 Department Head | |
| Date: 25252525-04-24 | Date: 25252525-04-25 | Date: 25252525-05-06 | Date: 25252525-05-07 | |