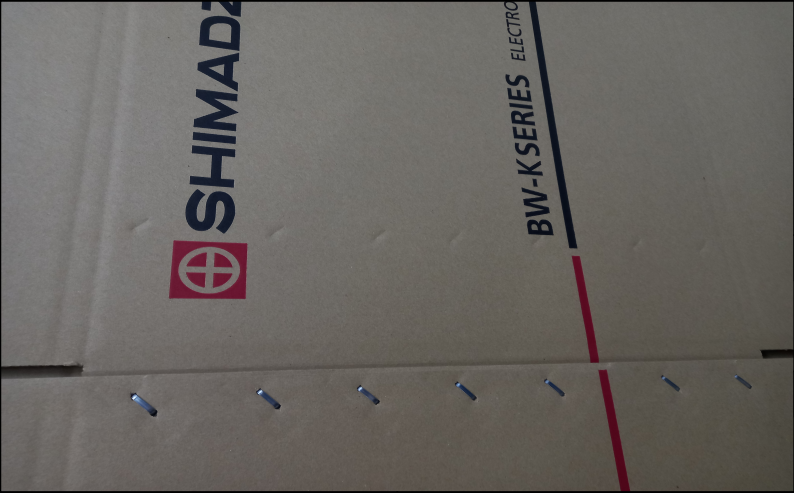


**KANEPACKAGE PHILIPPINE INC.**

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)

Customer		SHIMADZU PHILIPPINES MFG. INC.		Attention To		REXEL ALMARIO			
Item Code		321-60182		Department		PRODUCTION			
Item Description		OUTER BOX, BW		Date of Detection		241015			
Job Order Number		JO24-R-003438-73		Section Detected		QA SCREENING			
ILLUSTRATION OF THE PROBLEM									
				Lot Quantity (pcs)		Reject Qty (pcs)		Reject %	
				20		20		100.00	
				Nature of Defect:					
				DENT					
				Requirement:					
				NO DENT MARK					
				Actual					
				WITH DENT MARK					
NO. OF OCCURENCE		DISPOSITION		AREA OF OCCURENCE / ORIGIN			CONTENT		
<input checked="" type="checkbox"/> First <input type="checkbox"/> Recurrence No.: <u>1</u> Date.: <u>241024</u>		<input type="checkbox"/> Hold <input type="checkbox"/> Special Acceptance <input type="checkbox"/> For Rework <input checked="" type="checkbox"/> Reject / Disposal		<input type="checkbox"/> Slotter <input type="checkbox"/> EQOS <input type="checkbox"/> Diecut <input type="checkbox"/> Detaching <input type="checkbox"/> Gluing <input type="checkbox"/> Vertical <input checked="" type="checkbox"/> Others <u>TABLE STITCHING</u>			<input type="checkbox"/> Material <input type="checkbox"/> Dimension <input type="checkbox"/> Appearance <input checked="" type="checkbox"/> Process / Method		
Issued by		Checked by		Approved by			Received by (Receiving Section)		
ERIKA ASIS 241204		CHARLENE JAN MARIE FLORES 241204		MICHAEL CASILLANO 241204			GERALD DE GUZMAN 241206		
I. INVESTIGATION / ANALYSIS									
DIRECT CAUSE: (Analyze the reason of occurrence, why it happened?)									
System / Training									
Design / Toolings									
Process / Material									



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INVESTIGATION REPORT FORM (IRF)

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	Rework PPM (Good)	0
FG	n/a	0	0	0		
B. Orientation						
Date	2024-12-07				Time	08:11
Title	Orientation to Table Stitching Operator regarding Dent of Shimadzu 321 60182 Outer Box BW					
Attendees	All authorized in Table Stitching					
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: 2024-12-06	PIC: M.ASIS
Identified Rootcause No proper stacking/palletizing of items	Recommendation Orient the flap-to-flap orientation in stacking the items

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	M.ASIS	2025-01-20	[/] Yes [] No	1st	JO24-R-00409-171	250120	0	20
2nd Verification of Action	M.ASIS	2025-02-20	[/] Yes [] No	2nd	JO25-R-00017-195	250220	0	20
3rd Verification of Action	M.ASIS	2025-09-16	[/] Yes [] No	3rd	JO25-R-00084-112	250414	0	30
Effectiveness of Action	M.ASIS	2025-11-06	[/] Yes [] No	4th	JO25-R-00244-1	250916	0	15
Remarks:				5th	O25-R-00283-47	251106	0	30

IV. CLOSURE

Status	Remarks
Still Open	Five consecutive running with no dent issues

Approved by:		Process Owner Acknowledgment: (Receiving Section)	
MICHAEL CASILLANO 260112 12:23 QA Head	N/A Top Management	N/A Line Leader	N/A Department Head
Date: 26262626-01-12	Date: -	Date: -	Date: -