



# 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)

Control No.:

Date Issued

0044

250107

Customer	SANYO DENKI PHILS INC.	Attention To	REXEL ALMARIO
Item Code	00902009-01	Department	PRODUCTION
Item Description	PACKAGE	Date of Detection	250103
Job Order Number	JO24-M-02353-8	Section Detected	QA SCREENING

### ILLUSTRATION OF THE PROBLEM



**ACTUAL:** Did not meet level 15 Limit Criteria  
**REQUIREMENT:** Poor print acceptable up to level 15 Limit Criteria



Lot Quantity (pcs)	Reject Qty (pcs)	Reject %
520	40	7.69

Nature of Defect:

POOR PRINT

Requirement:

Poor print acceptable up to level 15 Limit Criteria

Actual

Did not meet level 15 Limit Criteria

NO. OF OCCURENCE	DISPOSITION	AREA OF OCCURENCE / ORIGIN	CONTENT
<input checked="" type="checkbox"/> First <input type="checkbox"/> Recurrence No.: <u>1</u> Date.: <u>250103</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 checked="" type="checkbox"/> EQOS <input type="checkbox"/> Diecut <input type="checkbox"/> Detaching <input type="checkbox"/> Gluing <input type="checkbox"/> Vertical <input type="checkbox"/> Others	<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)
LESTER JOHN DIOSO   250107	CHARLENE JAN MARIE FLORES   250111	MICHAEL CASILLANO   250113	GERALD DE GUZMAN   250113

### I. INVESTIGATION / ANALYSIS

**DIRECT CAUSE: (Analyze the reason of occurrence, why it happened?)**

**System / Training**

**Design / Toolings**

**Process / Material**

WHY 1 : W1 Ink didn t penetrate well in the item. r nW2 Uneven distribution of ink in the item r nW3 Due to wash board materials.

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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**

Process / Material

WHY 1: Increase the ink viscosity from 9 to 10

Egos Main Operator // 2024-12-28

WHY 2: Conduct study if the increasing of ink viscosity is applicable for washboard materials to eliminate poor print. r n(Subject of inclusion in Egos Work Instruction if effective.)

Production Leaders IE // 2025-03-21

**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	2025-03-21	Time	13:41
Title	n/a		
Attendees	n/a		

Prepared By:

Approved By:

GERALD DE GUZMAN | 250304

REXEL ALMARIO | 250507

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			[ ] Yes [ ] No	1st				
2nd Verification of Action			[ ] Yes [ ] No	2nd				
3rd Verification of Action			[ ] Yes [ ] No	3rd				
Effectiveness of Action			[ ] Yes [ ] No	4th				
Remarks:				5th				

**IV. CLOSURE**

Status	Remarks
Still Open	

Approved by:		Process Owner Acknowledgment: (Receiving Section)	
N/A	N/A	N/A	N/A
QA Head	Top Management	Line Leader	Department Head
Date: -	Date: -	Date: -	Date: -