

**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
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

 <div style="display: flex; justify-content: space-between;"> <p>ACTUAL: Did not meet level 15 Limit Criteria</p> <p>REQUIREMENT: Poor print acceptable up to level 15 Limit Criteria</p> </div>	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"/> Hold	<input type="checkbox"/> Slotter	<input type="checkbox"/> Material
<input type="checkbox"/> Recurrence No.: 1	<input type="checkbox"/> Special Acceptance	<input checked="" type="checkbox"/> EQOS	<input type="checkbox"/> Dimension
Date.: 250103	<input type="checkbox"/> For Rework	<input type="checkbox"/> Vertical	<input type="checkbox"/> Appearance
	<input checked="" type="checkbox"/> Reject / Disposal	<input type="checkbox"/> Diecut	<input checked="" type="checkbox"/> Process / Method
		<input type="checkbox"/> Detaching	
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.



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

Eqos Main Operator // 2024-12-28

WHY 2: Conduct study if the increasing of ink viscosity is applicable for washboard materials to eliminate poor print. (Subject of inclusion in Eqos 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		
FG	n/a	0	0	0	Rework PPM (Good)	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			<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	<p>Issued CAR-2425-PR-256, since the poor print re-occurred with 8.18% rejection rate.</p> <p>Details of the reject: Rejection quantity: 45 PCS. NG / 550 PCS. Item: 00902009-01 PACKAGE Detection: QA SCREENING 250312 Rejection Cost: PHP 506.70 (11.26 USD)</p> <p>Attached the CAR issuance request form 2425-PR-256</p>
Approved by:	Process Owner Acknowledgment: (Receiving Section)
N/A QA Head	N/A Top Management
Date: -	Date: -
N/A Line Leader	N/A Department Head
Date: -	Date: -