


**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)**

|  |  |  |  |  |  |
|--|--|--|--|--|--|
| <b>Customer</b><br>BROTHER INDUSTRIES PHILIPPINES, INC.  |  | <b>Control No.:</b>  |  | <b>Date Issued</b>   |  |
|  |  | 0058   |  | 250220   |  |
|  |  | <b>Attention To</b><br>REXEL ALMARIO   |  |  |  |
| <b>Item Code</b><br>D02WYS001  |  | <b>Department</b><br>PRODUCTION  |  |  |  |
| <b>Item Description</b><br>CARTON BK BTL21 (X20) PH  |  | <b>Date of Detection</b><br>250213   |  |  |  |
| <b>Job Order Number</b><br>JO25-M-00197-29   |  | <b>Section Detected</b><br>QA SCREENING  |  |  |  |
| <b>ILLUSTRATION OF THE PROBLEM</b>   |  |  |  |  |  |
|                          |  | <b>Lot Quantity (pcs)</b>  |  | <b>Reject Qty (pcs)</b>  |  |
|  |  | 500  |  | 20   |  |
|  |  | <b>Reject %</b>  |  | 4.00   |  |
|  |  | <b>Nature of Defect:</b>   |  |  |  |
|  |  | PEEL OFF   |  |  |  |
|  |  | <b>Requirement:</b>  |  |  |  |
|  |  | There should be no peel off  |  |  |  |
|  |  | <b>Actual</b>  |  |  |  |
|  |  | With peel off to 30 mm   |  |  |  |
| <b>NO. OF OCCURENCE</b>  |  | <b>DISPOSITION</b>   |  | <b>AREA OF OCCURENCE / ORIGIN</b>  |  |
| <input checked="" type="checkbox"/> First<br><input type="checkbox"/> Recurrence No.: 1<br>Date.: 250213 |  | <input type="checkbox"/> Hold<br><input type="checkbox"/> Special Acceptance<br><input type="checkbox"/> For Rework<br><input checked="" type="checkbox"/> Reject / Disposal |  | <input type="checkbox"/> Slotter<br><input type="checkbox"/> EQOS<br><input checked="" type="checkbox"/> Diecut<br><input type="checkbox"/> Detaching<br><input type="checkbox"/> Gluing<br><input type="checkbox"/> Vertical<br><input type="checkbox"/> Others |  |
| <b>CONTENT</b>   |  |  |  | <input type="checkbox"/> Material<br><input type="checkbox"/> Dimension<br><input type="checkbox"/> Appearance<br><input checked="" type="checkbox"/> Process / Method   |  |
| <b>Issued by</b>   |  | <b>Checked by</b>  |  | <b>Approved by</b>   |  |
| LESTER JOHN DIOSO   250220   |  | N/A  |  | N/A  |  |
|  |  |  |  | <b>Received by (Receiving Section)</b>   |  |
|  |  |  |  | N/A  |  |
| <b>I. INVESTIGATION / ANALYSIS</b>   |  |  |  |  |  |
| <b>DIRECT CAUSE: (Analyze the reason of occurrence, why it happened?)</b>                                |  |  |  |  |  |
| <b>System / Training</b>   |  |  |  |  |  |
| <b>Design / Toolings</b>   |  |  |  |  |  |
| <b>Process / Material</b>  |  |  |  |  |  |



**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)**

**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   |  |
| RM                |          |             |    |            | Total Good        |  |
| WIP               |          |             |    |            | Rework PPM (Good) |  |
| FG                |          |             |    |            |                   |  |
| B. Orientation    |          |             |    |            |                   |  |
| Date              |          |             |    |            | Time              |  |
| Title             |          |             |    |            |                   |  |
| Attendees         |          |             |    |            |                   |  |
| Prepared By:      |          |             |    |            | Approved By:      |  |
| N/A               |          |             |    |            | N/A               |  |
|                   |          |             |    |            | Department Head   |  |



**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)

### 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 |
|---------------|---------|
| Cancelled IRF |         |

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: -         |