

**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)

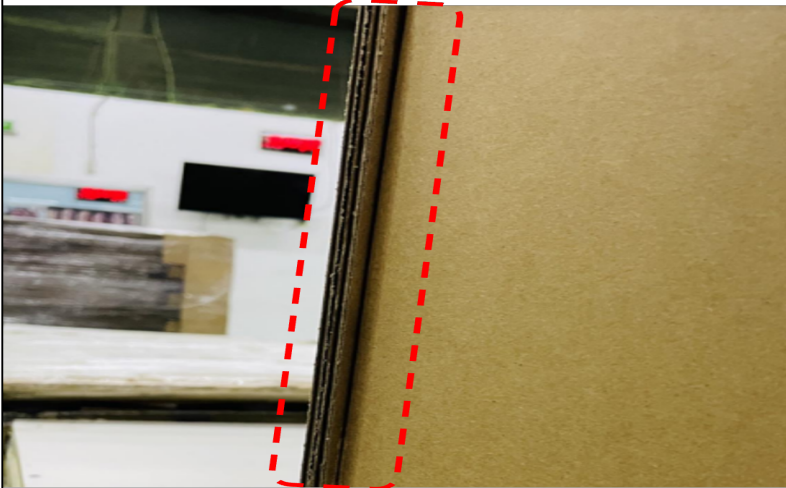
Control No.:

Date Issued

0064

250226

Customer	CANON BUSINESS MACHINE PHILS.	Attention To	REXEL ALMARIO
Item Code	RX1-5732-000	Department	PRODUCTION
Item Description	Z10 SLEEVE	Date of Detection	250222
Job Order Number	JO-F-25-185-4	Section Detected	QA SCREENING 3

ILLUSTRATION OF THE PROBLEM

Lot Quantity (pcs)	Reject Qty (pcs)	Reject %
600	25	4.17

Nature of Defect:

OVER LAP

Requirement:

NO OVERLAP

Actual

WITH OVERLAP

NO. OF OCCURENCE	DISPOSITION	AREA OF OCCURENCE / ORIGIN	CONTENT
<input checked="" type="checkbox"/> First <input type="checkbox"/> Recurrence No.: <u>1</u> Date.: <u>250222</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 checked="" 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)
MA. ERIKA MAE ASIS 250226	CHARLENE JAN MARIE FLORES 250226	MICHAEL CASILLANO 250303	GERALD DE GUZMAN 250410

I. INVESTIGATION / ANALYSIS**DIRECT CAUSE: (Analyze the reason of occurrence, why it happened?)****System / Training**

WHY 1 : Not enough pre folding to get the correct gap dimension.

WHY 2 : Operator on going familiarization to gluing process.

WHY 3 : Operator newly hired and cross train to gluing process.

Design / Toolings**Process / Material**

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INVESTIGATION REPORT FORM (IRF)**INDIRECT CAUSE: (Analyze the reason of occurrence, why it leaked?)****System / Training**

WHY 1 : N/A

Design / Toolings**Process / Material****FINAL CONCLUSION****CORRECTIVE ACTION: (Actions to be done to ensure that the problem will not happen again)****WHO / WHEN****System / Training**

WHY 1: Revision of Manual Gluing Work Instruction (inclusion of actual defect picture)

Production IE // 2025-04-25

WHY 2: Provision of sample gluing defect board

Production IE and Leaders //
2025-04-30

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	0
RM	na	0	0	0	Total Good	0
WIP	na	0	0	0	Rework PPM (Good)	0
FG	na	0	0	0		

B. Orientation

Date	2025-04-24	Time	09:00
Title	na		
Attendees	na		

Prepared By:**Approved By:**

GERALD DE GUZMAN | 250424

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
Closed 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: -