

**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

0074

250327

Customer	SANYO DENKI PHILS INC.	Attention To	REXEL ALMARIO
Item Code	00949347-01	Department	PRODUCTION
Item Description	Print Specification	Date of Detection	250323
Job Order Number	JO25-M-00641-141	Section Detected	QA SCREENING

**ILLUSTRATION OF THE PROBLEM**

Lot Quantity (pcs)	Reject Qty (pcs)	Reject %
1000	22	2.20

Nature of Defect:

MISALIGN PRINT

Requirement:

Print tolerance  $\pm 5\text{mm}$ 

Actual

Exceed specified print tolerance

NO. OF OCCURENCE	DISPOSITION	AREA OF OCCURENCE / ORIGIN	CONTENT
<input checked="" type="checkbox"/> First <input type="checkbox"/> Recurrence No.: <u>1</u> Date.: <u>250323</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   250327	CHARLENE JAN MARIE FLORES   250421	MICHAEL CASILLANO   250422	GERALD DE GUZMAN   250506

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

WHY 1 : PRINT MOVED AGAINST THE REQUIRED DIMENSION r nFROM CREASING TO PRINT SHOULD BE 4MM BUT THE ACTUAL DIMENSION IS 9MM.

WHY 2 : THERE IS AN OCCURRENCE OF MOVEMENT OF MATERIAL DURING FEEDING PROCESS

WHY 3 : RANDOM OCCURRENCE OF UNEVEN SHEET SIZE.

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

WHY 1 : NA

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

WHY 1: GENERATE GUIDELINES WITH REGARDS RANDOM TAPPING FOR DIECUTTED ITEMS TO VERIFY THE CORRECTNESS OF BOARDS SIZE.

Production Leader // 2025-05-31

**IMMEDIATE ACTION: (Action to be done to contain/ temporary correct the problem found)****A. Sorting Result**

	Location	Total Stock	NG	Total Good
RM	na	0	0	0
WIP	na	0	0	0
FG	na	0	0	0

**C. Reworking**

Rework Quantity	na
Total Good	0
Rework PPM (Good)	0

**B. Orientation**

Date	2025-05-15	Time	11:50
Title	na		
Attendees	na		

**Prepared By:****Approved By:**

GERALD DE GUZMAN | 250515

N/A

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: -