KAN	NEPACKAG	E PHILIPPINE INC.	INVESTIGATION REPORT FORM (IRF)							
) No. 5 R	Control I	No.:	Date Issued							
Telephone No. (049) 5457-7166 to 69 Fax No. (049) 545-6302			0092		250623					
Customer HIBLOW PHILIPPINES INC.			Attention To REXEL ALMARIO							
Item Code	DB04020120-00	Department PRODUCTION								
Item Description	VP Individual Lar	rge Box	Date of Detection 250610							
Job Order Number	JO25-M-01680-1	1	Section Detected	QA SCREENING 4						
1	LLUSTRATION C	OF THE PROBLEM								
OUALITY CONCE	RN – POOR PRIN	Lot Quantity (pcs) Reject		Qty (pcs)	Reject %					
Customer HIBLOW		NO GOOD	160	3	35	21.88				
	20120-00 VP DUAL BOX	Nature of Defect:								
Job Order Number JO25-M Lot Quantity 160 pcs	1-01680-11 Perios Wenter October 10	POOR PRINT								
Rejected Quantity 35 pcs.	ACTUAL:	Requirement:								
Rejection Rate / PPM 21.88% / 218,750 PPM the logo.  Detection date 250610			There should be no poor print on the logo							
Occurrence No. 1st  Detected by QA SCR	EENING 4	Actual								
Status REJECT Rejection Cost -				Presence of poor print near on the logo.						
NO. OF OCC	CURENCE	DISPOSITION	AREA OF OCCURENCE / ORIGIN CONTENT							
First		Hold	Slotter	Gluing	Material					
Recurrence No.: 1  Date.: 250610		Special Acceptance For Rework	EQOS Vertica Diecut Others Detaching		Dimension  Appearance					
		Reject / Disposal				Process / Method				
Issued	d by	Checked by	Approved by		Received	by (Receiving Section)				
LESTER JOHN DI	OSO   250623	CHARLENE JAN MARIE FLORES   250626	MICHAEL CASILLANO   250626			N/A				
		I. INVESTIGATION	ANALYSIS							
	nalyze the reasor	of occurence, why it happened?)								
System / Training										
Design / Toolings										
Process / Material										



## **INVESTIGATION REPORT FORM (IRF)**

INDIRECT CAUSE: (Analyze the reason of occurrence, why it leaked?)											
Syster	m / Trai	ning									
Dosina	. / Tool	inas									
Design	ı / Tool	ings									
Process / Material											
					FINAL CO	NCLUSION					
CORRE	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. Sort	ing Resu	ult				C. Reworking					
		Location	Total Stock	NG	Total Good	Rework Quantity					
RM						Total Good					
WIP											
FG						Rework PPM (Go	ood)				
B. Orie	ntation						•				
Date		Time									
Title											
Attend	ees										
Prepared By:			Approved By:								
N/A					N/A						
						Department Head					



## **INVESTIGATION REPORT FORM (IRF)**

II. QA ROOTCAUSE VERIFICATION (To be filled out by QA In-charge)													
Date Conducted:	PIC:	PIC:											
Ide	Identified Rootcause					Recommendation							
III. CORRECTIVE ACTION VERIFICATION (To be filled out by QA In-charge)													
	Checked By:	Date	Implemented?	Running	JO Nu	mber	Date	NG Qty	Lot Qty				
1st Verification of Action			[ ] Yes [ ] No	1st									
2nd Verification of Action			[ ] Yes [ ] No	2nd									
3rd Verification of Action	ification of Action		[ ] Yes [ ] No	3rd									
Effectiveness of Action			[ ] Yes [ ] No	4th									
Remarks:													
				5th									
IV. CLOSURE													
Status	marks												
Status			Ne	Remarks									
Still Open													
Approved by: Process Owner Acknowledgment: (Receiving Section)													
	Proces	Process Owner Acknowledgment: (Receiving Section)											
N/A		N/A		N/A			N/A						
QA Head	Тор М	anagement	Line	Line Leader			Department Head						
Date: -	Date: -		Date: -	Date: -			Date: -						