

**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)

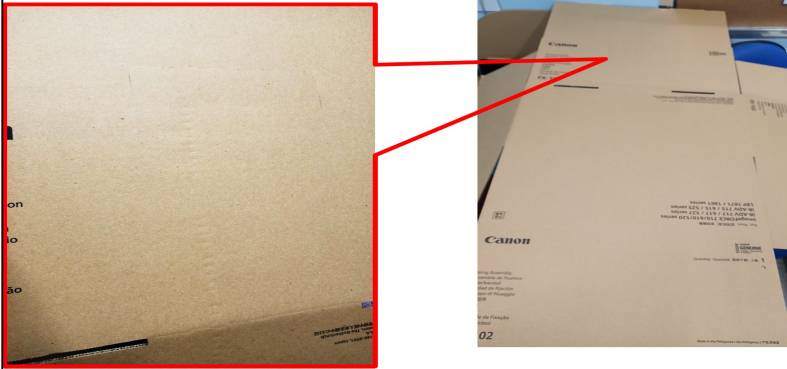
Control No.:

Date Issued

0109

250904

Customer	CANON BUSINESS MACHINE PHILS.	Attention To	REXEL ALMARIO
Item Code	FJ8-0057-000-RMFG	Department	PRODUCTION
Item Description	FIXING ASSEMBLY, FX-102	Date of Detection	250822
Job Order Number	JO-TO-IPD-25-00216-1	Section Detected	QA SCREENING

ILLUSTRATION OF THE PROBLEM

ACTUAL: With dent mark
REQUIREMENT: No dent mark

Lot Quantity (pcs)	Reject Qty (pcs)	Reject %
8180	159	1.94

Nature of Defect:

DENT

Requirement:

Dent mark should be only 25mm length by 25mm width

Actual

Dent mark up to 100 length

NO. OF OCCURENCE	DISPOSITION	AREA OF OCCURENCE / ORIGIN		CONTENT
<input checked="" type="checkbox"/> First <input type="checkbox"/> Recurrence No.: <u>1</u> Date.: <u>250822</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 type="checkbox"/> Gluing <input type="checkbox"/> Vertical <input checked="" type="checkbox"/> Others <u>EQOS / DIECUT</u>	<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 250904	CHARLENE JAN MARIE FLORES 250908	MICHAEL CASILLANO 250909	GERALD DE GUZMAN 250909	

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

WHY 1 : W1 The volume of items loaded into the feeder is too heavy in EQOS that caused dent. r nW2 The operator fed the materials beyond the standard height limit of 300mm for EB flute. r nW3 The operator has difficulty checking the standard height limit marking from time to time during feeding.

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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 : N/A

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

WHY 1: PR for Line Laser Marker to help operators easily identify the standard feeding height limit.

Production // 2025-12-12

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	N/A
WIP	N/A	0	0	0	Rework PPM (Good)	N/A
FG	N/A	0	0	0		

B. Orientation

Date	2026-01-20	Time	15:05
Title	N/A		
Attendees	n/a		

Prepared By:

Approved By:

GERALD DE GUZMAN | 260120

REXEL ALMARIO | 260427

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: -