

**KANE PACKAGE PHILIPPINE INC.**

No. 5 Ring Road LISI 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"/> Hold	<input type="checkbox"/> Slotter	<input type="checkbox"/> Material
<input type="checkbox"/> Recurrence No.: <u>1</u>	<input type="checkbox"/> Special Acceptance	<input type="checkbox"/> Gluing	<input type="checkbox"/> Dimension
Date.: <u>250822</u>	<input type="checkbox"/> For Rework	<input type="checkbox"/> EQOS	<input type="checkbox"/> Appearance
	<input checked="" type="checkbox"/> Reject / Disposal	<input type="checkbox"/> Vertical	<input checked="" type="checkbox"/> Process / Method
		<input type="checkbox"/> Diecut	
		<input type="checkbox"/> Detaching	
		<input checked="" type="checkbox"/> Others	
		<input type="checkbox"/> EQOS / DIECUT	

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.



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

  

B. Orientation	
Date	2026-01-20
Title	N/A
Attendees	n/a
Prepared By:	Approved By:

  

GERALD DE GUZMAN   260120	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			<input type="checkbox"/> Yes <input type="checkbox"/> No	1st				
2nd Verification of Action			<input type="checkbox"/> Yes <input type="checkbox"/> No	2nd				
3rd Verification of Action			<input type="checkbox"/> Yes <input type="checkbox"/> No	3rd				
Effectiveness of Action			<input type="checkbox"/> Yes <input type="checkbox"/> No	4th				
Remarks:				5th				

**IV. CLOSURE**

Status	Remarks		
Still Open			
Approved by:		Process Owner Acknowledgment: (Receiving Section)	
N/A QA Head	N/A Top Management	N/A Line Leader	N/A Department Head
Date: -	Date: -	Date: -	Date: -