

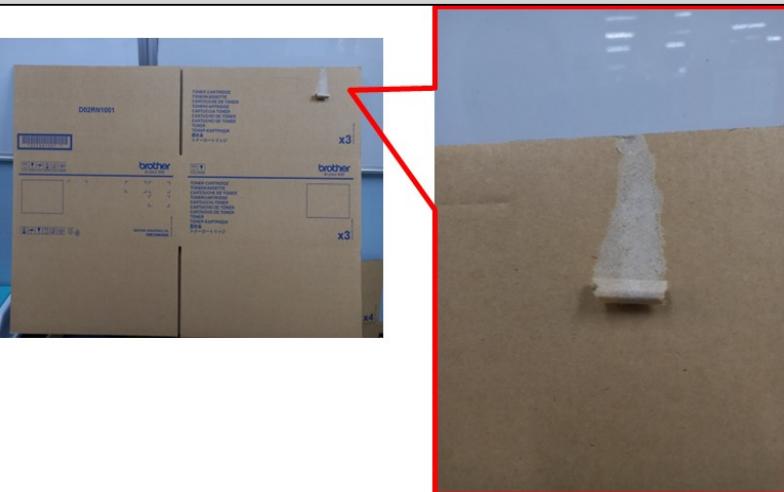
**KANE PACKAGE PHILIPPINE INC.**

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
0115	251011

Customer	BROTHER INDUSTRIES PHILIPPINES, INC.	Attention To	REXEL ALMARIO
Item Code	D02RN1001	Department	PRODUCTION
Item Description	CARTON DEV UNIT ELLE (X3)	Date of Detection	251002
Job Order Number	JO25-M-03051-35	Section Detected	QA SCREENING

ILLUSTRATION OF THE PROBLEM

Lot Quantity (pcs)	Reject Qty (pcs)	Reject %
1000	41	4.10

Nature of Defect:

PEEL OFF

Requirement:

PEEL OFF ON EDGE SHOULD BE LESS THAN 5MMX10MM

Actual

PEEL OFF UP TO 65MM X 30MM

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"/> EQOS	<input type="checkbox"/> Dimension
Date.: <u>251002</u>	<input type="checkbox"/> For Rework	<input checked="" type="checkbox"/> Diecut	<input type="checkbox"/> Appearance
	<input checked="" type="checkbox"/> Reject / Disposal	<input type="checkbox"/> Detaching	<input checked="" type="checkbox"/> Process / Method
Issued by	Checked by	Approved by	Received by (Receiving Section)
MA. ERIKA MAE ASIS 251011	CHARLENE JAN MARIE FLORES 251017	MICHAEL CASILLANO 251017	GERALD DE GUZMAN 251023

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

WHY 1 : W1 Operator auto strip the item but encounter peel off. r nW2 Presence of uncut liner. r nW3 Insufficient pressure at the affected portion. r nW4 Insufficient backing tape.



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: Apply additional backing tape at the affected peel off portion.

PRODUCTION // 2025-10-03

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	2026-01-01
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: -