

**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

0116

251013

Customer	BROTHER INDUSTRIES PHILIPPINES, INC.	Attention To	REXEL ALMARIO
Item Code	D02RN1001	Department	PRODUCTION
Item Description	CARTON DEV UNIT ELLE (X3)	Date of Detection	251004
Job Order Number	JO25-M-03051-36	Section Detected	QA SCREENING 5

ILLUSTRATION OF THE PROBLEM

Actual: 3mm misalign print
Requirement: 17mm (tolerance:+5/-0)

Lot Quantity (pcs)	Reject Qty (pcs)	Reject %
1400	60	4.29
Nature of Defect:		
MISALIGN PRINT		
Requirement:		
17mm (tolerance:+5/-0)		
Actual		
3mm misalign print		

NO. OF OCCURENCE	DISPOSITION	AREA OF OCCURENCE / ORIGIN	CONTENT
<input type="checkbox"/> First <input checked="" type="checkbox"/> Recurrence No.: <u>2</u> Date.: <u>250703</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 251013	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 : Misaligned diecut at Eterna.

WHY 2 : Random delayed feeding of materials.

WHY 3 : r n Stucked up bearing at feeder roller (findings during Eterna machine maintenance c/o Supplier) r nand worn out engineering plastic in the gripper bar causing misalign gripped.

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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: Replacement of worn out machine part.

PRoduction/Eng g // 2025-11-29

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	NA
RM	na	0	0	0	Total Good	NA
WIP	na	0	0	0	Rework PPM (Good)	NA
FG	na	0	0	0		

B. Orientation

Date	2025-11-22	Time	16:10
Title	na		
Attendees	na		

Prepared By:

Approved By:

GERALD DE GUZMAN | 251122

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: -