

**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

0145

260228

Customer	SANYO DENKI PHILS INC.	Attention To	REXEL ALMARIO
Item Code	00902010-01	Department	PRODUCTION
Item Description	PRINT SPECIFICATION	Date of Detection	260219
Job Order Number	JO26-M-00085-49	Section Detected	QA SCREENING

ILLUSTRATION OF THE PROBLEM

Lot Quantity (pcs)	Reject Qty (pcs)	Reject %
1700	39	2.29
Nature of Defect:		
MISALIGN PRINT		
Requirement:		
+/- 5MM		
Actual		
RANGE OF MISALIGNMENT: 6-12MM		

NO. OF OCCURENCE	DISPOSITION	AREA OF OCCURENCE / ORIGIN	CONTENT
<input checked="" type="checkbox"/> First <input type="checkbox"/> Recurrence No.: <u>1</u> Date.: <u>260219</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 checked="" type="checkbox"/> Appearance <input type="checkbox"/> Process / Method
Issued by	Checked by	Approved by	Received by (Receiving Section)
CHARLENE JAN MARIE FLORES 260228	CHARLENE JAN MARIE FLORES 260304	MICHAEL CASILLANO 260305	GERALD DE GUZMAN 260310

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

WHY 1 : misaligned print is a recurring issue on this item

WHY 2 : there were warp materials encountered r n

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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****Design / Toolings**

WHY 1: Change cyrel and dieblade design from 2 outs to 1 out

Sales // 2026-04-24

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

B. Orientation

Date	0001-01-01	Time	00:00
Title	0		
Attendees	0		

Prepared By:

Approved By:

GERALD DE GUZMAN | 260423

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: -