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KANEPACKAGE PHILIPPINE INC.

No. 5 Ring Road LISP II, Brgy. La Mesa, Calamba City, Laguna
Telephone No. (049) 545-7166 to 69
Fax No. (049) 545-6302

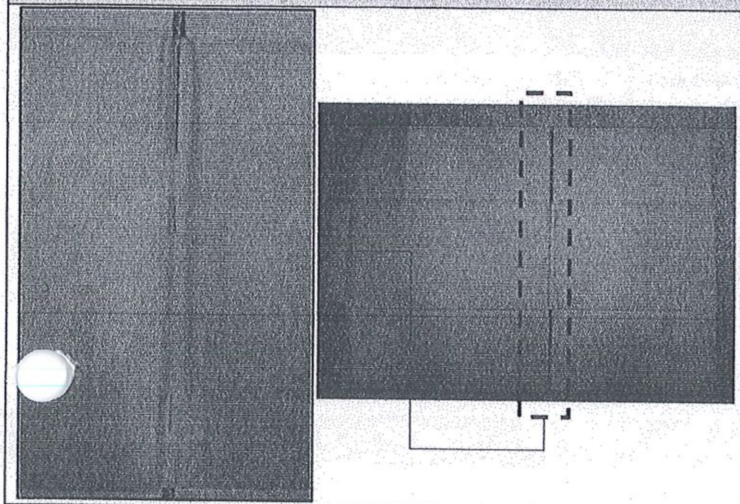
INVESTIGATION REPORT FORM (IRF)

- [x] Inhouse Detection
- [ ] Customer Claim

Control No.: 146 | Date Issued: 20 01 20

Customer	EPSON VP	Attention To	Mr. Gerald De Guzman / Ms. Weena Apalla
Item Code	5151424-00	Department	PRODUCTION
Item Description	CARTON (STD;A)_PH	Date of Detection	20 01 18
Job Order Number	WO-20-L0004-14	Section Detected	PRD - GLUING

ILLUSTRATION OF THE PROBLEM



- [x] Major
- [ ] Minor

Lot Quantity (pcs.)	Reject Quantity (pcs.)	Reject Percentage
290	25	8.62%

Nature of Defect:

BURSTING

Requirement:

Bursting should not be visible (As per checking w/ EP VP Defect Limit Criteria)

Actual:

Bursting occurs on the vertical creasing of the item

NO. OF OCCURRENCE	DISPOSITION	AREA OF OCCURRENCE / ORIGIN		CONTENT
[x] First	[ ] Hold	[ ] Slotter	[ ] Gluing	[ ] Material
[ ] Recurrence	[ ] Special Acceptance	[ ] EQOS	[ ] Vertical	[ ] Dimension
No.:______	[ ] For Rework	[x] Diecut ETERNA	[ ] Others:	[x] Appearance
Date:______	[x] Reject / Disposal	[ ] Detaching	______	[ ] Process / Method

Issued by	Checked by	Approved by	Received by (Receiving Section)
Adrian Vergara QA-IE Staff	Mr. Roderick Ramos QA Supervisor	Mr. Rexel Almario QA Asst. Manager	Mr. Gerald De Guzman / Ms. Weena Apalla Head/ Supervisor

I. INVESTIGATION / ANALYSIS

	DIRECT CAUSE: (Analyze the reason of occurrence, why it happened?)	INDIRECT CAUSE: (Analyze the reason of occurrence, why it leaked?)
System / Training	Why 1: Why 2: Why 3: NOT A FACTOR Why 4: Why 5:	Why 1: Why 2: Why 3: NOT A FACTOR Why 4: Why 5:
Design / Toolings	Why 1: Why 2: Why 3: NOT A FACTOR Why 4: Why 5:	Why 1: Why 2: Why 3: NOT A FACTOR Why 4: Why 5:
Process / Material	Why 1: - TIGHT IMPRESSION OF DIECUT IN ETERNA Why 2: - THERE IS ABNORMAL ACTIVITY OF MACHINE Why 3: - BECAUSE OCCURENCE IS RANDOMLY AND NO Why 4: CHANGES IN MACHINE SETUP FROM THE START (APPROVED BY QA PATROL) Why 5: UNTIL THE END.	Why 1: - MASS PRODUCTION APPROVED BY QA Why 2: PATROL Why 3: - ONLY THE TOP PORTION OF EVERY BATCH Why 4: 25pcs WAS CONDUCTED SAMPLING AND Why 5: NO OCCURENCE FOUND THAT TIME.

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FINAL CONCLUSION

OCCURRENCE ROOTCAUSE	OUTFLOW ROOTCAUSE
ABNORMAL ACTIVITY OF MACHINE.	OCCURENCE CANNOT DETECTED DURING SAMPLING.

IMMEDIATE ACTION: (Action to be done to contain/ temporary correct the problem found)

A. Sorting Result

	Location	Total Stock	NG	Total Good
RM	N/A			
WIP	PRD - GLUING	290	25	265
FG	QA - INLINE	265	0	265

B. Orientation

Date	N/A	Time	N/A
Title	N/A		
...ees	N/A		

C. Reworking

Rework Quantity	N/A
Total Good	N/A
Rework Percentage (Good)	N/A

CORRECTIVE ACTION: (Actions to be done to ensure that the problem will not happen again)

	Actions to be done to eliminate recurrence	Who / When
System	N/A	N/A
Design / Tools	N/A	N/A
Process	MONITOR THE ACTIVITY IN ETERNA PROCESS TO FIND THE ABNORMALITY	Production & 3PM TEAM

II. QA ROOTCAUSE VERIFICATION (To be filled out by QA In-charge)

Date Conducted: 20 01 20 PIC: A. Vergara

Identified Rootcause	Recommendation
~Over impression applied on the diecut blade by the machine, because of thick application of backing tape & high impression setup (To avoid uncut kraftliner)	~Reduce the impression of the machine even the diecut blade backing tape is thick it will not burst (from 2.0 to 1.8)

III. CORRECTIVE ACTION VERIFICATION (To be filled out by QA In-charge)

	Checked by	Date	Implemented?		Remarks
1st Verification of Action	A. Vergara	20 01 20	[✓] Yes	[ ] No	Corrective Action is already Implemented
2nd Verification of Action	A. Vergara	20 01 22	[✓] Yes	[ ] No	Recommendation is implemented
3rd Verification of Action			[ ] Yes	[ ] No	
Effectiveness of Action	A. Vergara	20 10 28	[✓] Yes	[ ] No	Recommendation is effective

Note: If no same defects / problems occurs for 5 consecutive deliveries, corrective action is considered effective / closed. If the same problem occurs within 5 consecutive deliveries or 3rd verification of action still not yet implemented, Investigation Report shall be re-issued to the affected department to provide new improvement action.

IV. CLOSURE

Status	Remarks	Approved by:		Process Owner Acknowledgment: (Receiving Section)	
[✓] Closed [ ] Still Open [ ] Re-Issue IR		QA Supervisor Date: 21 01 11	QA Asst. Manager Date: 21 01 11	Line Leader Date: 21 01 11	Department Head Date: 21 01 11

QUALITY ASSURANCE DEPARTMENT
CLOSED
DATE AND SIGNATURE 21 01 09