# 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

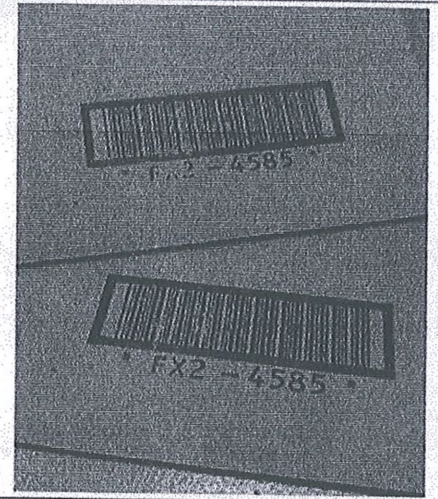
# INVESTIGATION REPORT FORM (IRF)

- [x] Inhouse Detection
- [ ] Customer Claim

Control No.: 162 | Date Issued: 20 02 07

| | | | |
|---|---|---|---|
| Customer | CANON | Attention To | Mr. Gerald De Guzman / Ms. Weena Apalla |
| Item Code | FX2-4585-000 | Department | PRODUCTION |
| Item Description | Z10 BACK UP SHEET | Date of Detection | 20 02 05 |
| Job Order Number | WO-F-20-016-6 | Section Detected | QA - SCREENING |

**ILLUSTRATION OF THE PROBLEM**




- [ ] Major
- [ ] Minor

| Lot Quantity (pcs.) | Reject Quantity (pcs.) | Reject Percentage |
|---|---|---|
| 4,000 | 60 | 1.50% |

**Nature of Defect:**

POOR PRINT

**Requirement:**

Printing of barcode should be complete

**Actual:**

Inscomplete printing in barcode

| NO. OF OCCURRENCE | DISPOSITION | AREA OF OCCURRENCE / ORIGIN | | CONTENT |
|---|---|---|---|---|
| [ ] First | [ ] Hold | [ ] Slotter | [ ] Gluing | [ ] Material |
| [x] Recurrence | [ ] Special Acceptance | [x] EQOS | [ ] Vertical | [ ] Dimension |
| No.: 2 | [ ] For Rework | [ ] Diecut | [ ] Others: | [x] Appearance |
| Date: 20 02 05 | [x] Reject / Disposal | [ ] Detaching | | [ ] Process / Method |

| Issued by | Checked by | Approved by | Received by (Receiving Section) |
|---|---|---|---|
| Adrian Vergara<br>QA-IE Staff | Mr. Roderick Ramos<br>QA Supervisor | Mr. Rexel Almario<br>QA Asst. Manager | Mr. Gerald De Guzman / Ms. Weena Apalla<br>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:<br>Why 2:<br>Why 3: NOT A FACTOR<br>Why 4:<br>Why 5: | Why 1:<br>Why 2:<br>Why 3: NOT A FACTOR<br>Why 4:<br>Why 5: |
| Design / Toolings | Why 1:<br>Why 2: - ITEM IS PRONE TO POOR<br>Why 3: PRINT BECAUSE THE PRINT<br>Why 4: IS ALLIGN IN THE<br>Why 5: GRAIN DIRECTION | Why 1:<br>Why 2: - DESIGN APPROVED<br>Why 3: BY CUSTOMER<br>Why 4:<br>Why 5: |
| Process / Material | Why 1:<br>Why 2:<br>Why 3: NOT A FACTOR<br>Why 4:<br>Why 5: | Why 1:<br>Why 2: - ALL AFFECTED ARE<br>Why 3: READABLE BY BARCODE<br>Why 4: SCANNER.<br>Why 5: |

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## FINAL CONCLUSION

| OCCURRENCE ROOTCAUSE | OUTFLOW ROOTCAUSE |
|---|---|
| -THE PRINT IS ALLIGN IN THE GRAIN DIRECTION | -APPROVED BY CUSTOMER<br>-ALL AFFECTED ARE READABLE BY BARCODE SCANNER. |

**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 | N/A | | | |
| FG | QA SCREENING | 4,000 | 60 | 3,940 |

B. Orientation

| Date | N/A | Time | N/A |
|---|---|---|---|
| Title | N/A | | |
| Attendees | 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 | |
| Design / Tools | CHANGE LAYOUT OF ITEM | SALES & DESIGN |
| Process | N/A | |

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

Date Conducted: 20 02 10 PIC: A. Vergara

| Identified Rootcause | Recommendation |
|---|---|
| ~ Poor Print starts to occur due to the grain direction of the material and barcode lines are perpendicular to each other (sometimes the rubber plate cannot reach the dents between the corrugated medium | ~ change design of the item where print location will be change from horizontal orientation to vertical orientation |

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

| | Checked by | Date | Implemented? | | Remarks |
|---|---|---|---|---|---|
| 1st Verification of Action | A. Vergara | 20 02 17 | [ ] Yes | [/] No | With 4m application to customer waiting for approval |
| 2nd Verification of Action | A. Vergara | 20 07 09 | [/] Yes | [ ] No | 4M Approved |
| 3rd Verification of Action | | | [ ] Yes | [ ] No | |
| Effectiveness of Action | A. Vergara | 20 08 12 | [/] Yes | [ ] No | C.A is effective |

QUALITY ASSURANCE DEPARTMENT
CLOSED
DATE AND SIGNATURE 200826

*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<br>[ ] Still Open<br>[ ] Re-Issue IRF | No occurence in FLA's running but still need for 2nd verification. | QA Supervisor<br>Date: 200805 | QA Asst. Manager<br>Date: 200825 | IRISH MAY L. ESTAREJA<br>Line Leader<br>Date: 200825 | Department Head<br>Date: 200825 |