

**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

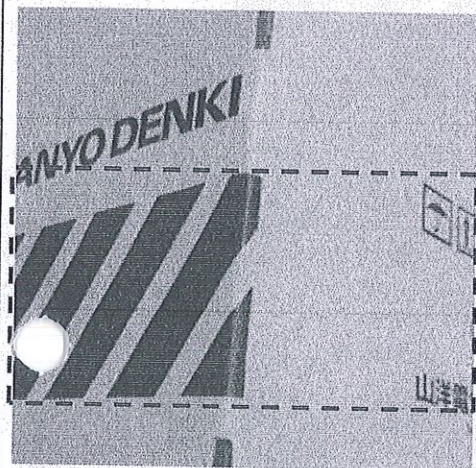
INVESTIGATION REPORT FORM (IRF)☒ Inhouse Detection☐ Customer Claim

Control No.: 203

Date Issued: 20 03 06

Customer	SANYO DENKI
Item Code	00939007-01
Item Description	CORRUGATED CARTON
Job Order Number	WO-DRS-20-M-00289-12

Attention To	Mr. Gerald De Guzman / Ms. Weena Apalla
Department	PRODUCTION
Date of Detection	20 03 05
Section Detected	QA - SCREENING

ILLUSTRATION OF THE PROBLEM

TOLERANCE	
DIMENSION: +/- 3	
<=50	+/- 1
51~200	+/- 2
201~400	+/- 3
401~700	+/- 4
701~1000	+/- 5
1000<	+/- 8
PRINT: +/- 5	

☒ Major☐ Minor

Lot Quantity (pcs.)	Reject Quantity (pcs.)	Reject Percentage
595	114	19.16%

Nature of Defect:

MISALIGN DIECUT / PRINT

Requirement:

Inclined Solid Print may exceed on the vertical creasing within ± 5 mm

Actual:

Print exceed on the creasing ranging 8-10mm

NO. OF OCCURRENCE		DISPOSITION		AREA OF OCCURRENCE / ORIGIN		CONTENT
<input type="checkbox"/> First		<input type="checkbox"/> Hold		<input type="checkbox"/> Slotter	<input type="checkbox"/> Gluing	<input type="checkbox"/> Material
<input checked="" type="checkbox"/> Recurrence		<input checked="" type="checkbox"/> Special Acceptance		<input checked="" type="checkbox"/> EQOS	<input type="checkbox"/> Vertical	<input checked="" type="checkbox"/> Dimension
No.: 2nd		<input type="checkbox"/> For Rework		<input checked="" type="checkbox"/> Diecut	<input type="checkbox"/> Others:	<input checked="" type="checkbox"/> Appearance
Date: 20 03 05		<input type="checkbox"/> Reject / Disposal		<input type="checkbox"/> Detaching		<input type="checkbox"/> Process / Method
Issued by		Checked by		Approved by		Received by (Receiving Section)
 Adrian Vergara QA-IE Staff				 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 1:	
	Why 2:		Why 2:	
	Why 3:	NOT A FACTOR	Why 3:	NOT A FACTOR
	Why 4:		Why 4:	
	Why 5:		Why 5:	
Design / Toolings	Why 1:		Why 1:	
	Why 2:		Why 2:	
	Why 3:	NOT A FACTOR	Why 3:	NOT A FACTOR
	Why 4:		Why 4:	
	Why 5:		Why 5:	
Process / Material	Why 1:		Why 1:	
	Why 2:		Why 2:	
	Why 3:	PLS. SEE ATTACHED	Why 3:	PLS. SEE ATTACHED
	Why 4:		Why 4:	
	Why 5:		Why 5:	

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INVESTIGATION REPORT FORM (IRF)**FINAL CONCLUSION****OCCURRENCE ROOTCAUSE**

- THERE IS MOVEMENT OF PRINT IN
EQOS DUE TO UNEVEN SHEET.

OUTFLOW ROOTCAUSE

- POSSIBLE OCCURRENCE IS RANDOMLY AND THE
ITEM IS NOT YET DISCUSSED WHY IS NOT
SO VISIBLE.

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

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

A. Sorting Result

	Location	Total Stock	NG	Total Good
RM	N/A			
WIP	N/A			
FG	QA - SCREENING	1,592	114	1,484

Actions to be done to eliminate recurrence**Who / When**

System

N/A

Design /
Tools

N/A

Process

PLS. SEE ATTACHED

B. Orientation

Date	N/A	Time	N/A
T	N/A		
Attendees	N/A		

C. Reworking

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

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

Date Conducted: 19 03 07 PIC: A. Vergara

Identified Rootcause**Recommendation**

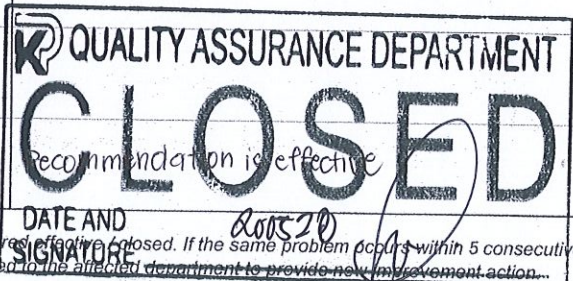
~ Greater gap occurs due to loose setup side
guide in feeding unit (Printing location movement
for lateral is probably to occur)

~ Standardize the minimum & maximum side guide
allowance setup
~ Tap the sheets on the left side of feeding guide of
printing machine

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

	Checked by	Date	Implemented?	Remarks
1st Verification of Action	A. Vergara	20 03 07	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Not Effective
2nd Verification of Action	A. Vergara	20 03 09	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Recommendation #2 is implemented
3rd Verification of Action			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Effectiveness of Action	A. Vergara	20 03 14	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Recommendation is effective

Note: If no same defects / problems occurs for 5 consecutive deliveries, corrective action is considered effective. 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)
<input checked="" type="checkbox"/> Closed <input type="checkbox"/> Still Open <input type="checkbox"/> Re-Issue IRF	No occurrence of Misalign Print.	 QA Supervisor Date: 20 07 08	 QA Asst. Manager Date: 20 07 08 Line Leader Date: 2007/3 Department Head Date: 20 07 13

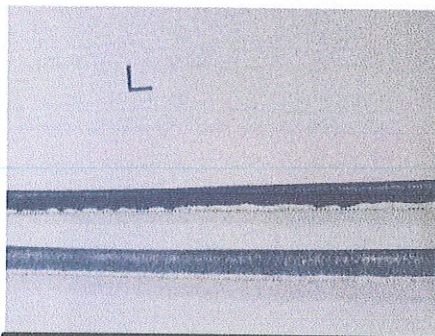
INVESTIGATION REPORT FOR MISALIGN PRINT OF SANYO DENKI 00939007-01 CORRUGATED CARTON

DIRECT CAUSE PROCESS/MATERIAL	W1 - Upon investigation of actual item in Diecut process, there is movement in print of this item.
	W2 - One of the factor of print movement is the random of uneven sheet.

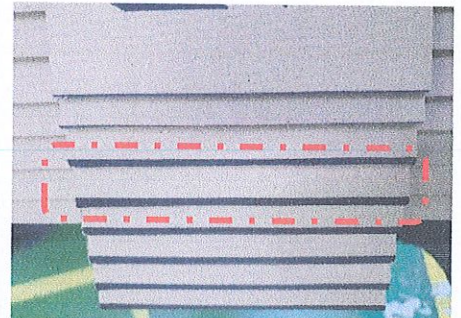
DIRECT CAUSE PROCESS/MATERIAL	W1 - Trial run approved by QA Patrol, that's why they proceed in mass production.
	W2 - Operator did not notice the misalign print, because possible the occurrence is randomly and the item is not yet die-cutted why is not so visible.



Actual item with random of



Actual item for diecut process



Actual item processed in diecut

CORRECTIVE ACTION

> For immediate corrective action sort the affective WIP before diecut process and segregate by corresponding print movement.

PIC: Production

Target Date: 200307 (Done)

> Check the material and sort if there is occurrence of uneven sheets.

PIC: Production & QA

Target Date: Next running