	No. 5 Ring Roa	d LISP II, Brgy. La (049) 545-7166 to	Mesa, Calamba Cit	PPINE INC. ry, Laguna	IN	VESTIGA			FORM (IRF)	
*15000004	. , -				Control	No.: IRF-04-001	5	Date Issued:	21-Apr-22	
Customer		EMORI			Attentic	on To	NOEMI CEPE	DA		
Item Code		HP33D1027-1			Departi	ment	KPLIMA-PRO	DUCTION		
Item Description	n	OUTER BOX			Date of Detection 20-Apr-22					
Job Order Nun	nber	15101			Section	Detected	EMORI QA			
	ILLU	JSTRATION OF	THE PROBLEM	•		Major		Mino		
/						ot Quantity (pcs.) 238	1	antity (pcs.) 6	Reject Percentage 10.92%	
					Nature	Nature of Defect:  SCORING				
						Requirement:  ITEM SHOULD BE IN GOOD CONDITION; NO OCCURRENCE OF SCORING  Actual:				
				*******						
J.					1	SCOR	ING OCCURRE	ON THE UPI	PER FLAP	
NO.	OF OCCURRE	ENCE	D	ISPOSITION		AREA OF OCC	URRENCE / OR	IGIN	CONTENT	
First			Hold			Slotter	Gluir	ng	Material	
Recu	rrence		Special	Acceptance		EQOS	Verti	cal	Dimension	
No.:			For Rev	work		Diecut	Othe	rs:	Appearance	
Date:			Reject	/ Disposal		Detaching			Process / Method	
	Issued by		W. Barrier	Checked by		Approved	by		Received by (Receiving Section)	
Chenie	Annle Area QA-IE Staff	ialo	Q	Huloz		QA Asst. Mai	nager	\	Heap! Supervisor	
DIRE	CT CAUSE: (A	nalyze the reaso	on of occurrence.	il INVESTIGA why it happened?)	INWAN		E: (Analyze the r	eason of occu	rrence, why it leaked?)	
Why 1:	resquezas anticas a se		311331131131131313131313131		Why 1:	Salar and an annual section of the s				
					Why 2:					
Why 3:					Why 3:					
₩hy 4:				Why 4:						
				Why 5:						
Why 5:  Why 1:  Sign Why 2:  Why 3:  Why 4:  On the state of the state					Why 1:					
						Why 2:  Why 3:  Why 4:  Why 5:				
Why 3:										
Why 5					_					
Why 1:					Why 1:					
Process / Material April 2 My 4					Why 2:					
Why 3					Why 3:					
Miny 4	:				Why 4:					
Why 5	1				Why 5:					

## 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)**

Rework Quantity Total Good Rework Percentage (Good)    IJI QARCOTCAUSE VERIFICATION (To befilled out by QA Incibities)   Date Conducted: PIC:		Pax No. (049) 34	3-0302								
MMEDATE ACTION: Pulses to be done to central temperary correct the problem found)   CORRECTIVE ACTION: Actions to be done to estimate problem all northogons gaps;   Suffing Result							GR#2(0)//				
Sorting Result  Location Total Steek NG Tetal Good RM   Commentation   Comment   Comme	A. S. A. S. S. D. D. S.	[1445]A.M.M.M.M.	COURRENCE	ROOTCAUSE	- A distribution				OUTFLOW ROOTCAUSE		
Sorting Result  Location Total Steek NG Tetal Good RM   Comment of the Comment of											
Sorting Result  Localion Tolel Stock NG Totel Good RM When GO											
Sorting Result  Localion Tolel Stock NG Totel Good RM When GO							* 1.4				
Location   Total Stock   NG   Total Good   System	4.5 (4.5 (5.4 (4.5 (4.5 (4.5 (4.5 (4.5 (		clion to be done to	contaîn/ temporar	ry correct the probl	em found)	CORREC			51.5445 515 44415 1 155 545	
RM WVP FG	A. Sorting Resul ۲							Actions to be o	lone to eliminate recurrence	Who / W	
WIP FG   Design / Tranc   Design / Tranc   Design / Tranc   Design / Trance   Design		Loca	tion	Total Stock	NG	Total Good					
FG 3. Orientation Date Time Time Design / Tools Title Anadrees Process Rework Quantity Process Rework Quantity Process  If A ROTGAUSE VERIFICATION (To bit mibit out by CA (incharge)) Date Conducted: PIC: PIC: PIC: PIC: PIC: PIC: PIC: PIC							System				
8. Orientation Date Time Design / Tools  Title Process Rework Quantity Total Good Rework Percentage (Good)  If QR ROOTCAUSE VERIFICATION (To be filled out by QA in share) Identified Rootcause  Design / Tools  Process  Process  Design / Tools  Process  Process  Design / Tools  Process  Process  If QR ROOTCAUSE VERIFICATION (To be filled out by QA in share)  If QR ROOTCAUSE VERIFICATION (To be filled out by QA in share)  If QR ROOTCAUSE VERIFICATION (To be filled out by QA in share)  If QR ROOTCAUSE VERIFICATION (To be filled out by QA in share)  Recommendation  If Yos [] No  It Verification of Action  If Yes [] No  And Verification of Action  If Yes [] No  Process  If   Yes   I   No  Process   I     No  Process   I     No  Process   I     No  Process   I     No  Process   I     No  Process   I											
Date Title   Design / Tools    Altendes   Design / Tools    Altendes   Design / Tools    Altendes   Design / Tools    Altendes   Design / Tools    Rework Quantity   Process    Total Good   Process    Altendes   Process   Process    Altend	1,1111,1111,111,111			8 4 5 5 5 4 5 4 5 4 5 5 5 5 5 5 5 5 5 5	1 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	estalitas salateis					
Title Attandess C. Reworking Rework Quantity Total Good Rework Percentage (Good)  II. GA ROOTGAUSE VERIFICATION (To be filled out by OA In-drarge)  Identified Rootcause  III. GA ROOTGAUSE VERIFICATION (To be filled out by OA In-drarge)  Date Conducted: PIC: Recommendation  III. CORRECTIVE ACTION VERIFICATION (To be filled out by OA In-drarge)  Att Verification of Action  I I Yes [ ] No  Individual of Action I   Yes   ] No  And Verification of Action I   Yes   ] No  Effectiveness of Action I   Yes   ] No  Note: If no same defects / problems occurs for 5 consecutive delivaries, corrective action is considered effective / closed. If the same problem occurs within 5 consecutive delivaries or 3rd verification of action sit not yet implemented, investigation Report shall be re-issued to the affected department to provide new improvement action.  IVICELOSUGE Status: Remarks: Approved by: Process Owner Acknowledgment: (Receiving Section)  Closeed  Status: Remarks: Approved by: Process Owner Acknowledgment: (Receiving Section)											
Altendees   Reworking   Rework Quantity				Time							
Rework Quantity Total Good Rework Percentage (Good)  III. GA RODTCAUSE VERIFICATION (To be Utiled out by QA Irecharge)  III. GA RODTCAUSE VERIFICATION (To be Utiled out by QA Irecharge)  III. GORRECTIVE ACTION VERIFICATION (To be Utiled out by QA Irecharge)  III. GORRECTIVE ACTION VERIFICATION (To be Utiled out by QA Irecharge).  Checked by  Date implemented?  Recommendation  I   Yes     No  2nd Verification of Action  I   Yes     No  Effectiveness of Action  I   Yes     No  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 attinot yet implemented, investigation Report shall be re-issued to the affected department to provide new improvement action.  IV. CoLosure  Status:  Remarks:  Approved by:  Process Owner Acknowledgment: (Receiving Section)  Closed		:					10018				
Rework Quantity Total Good Rework Percentage (Good)  IJ, QARCOTCAUSE VERIFICATION (To be filled cirtle) QA Incitage) Identified Rootcause  Recommendation  III.CORRECTIVE ACTION VERIFICATION (To be filled cirtle) QA Incitage)  IST Verification of Action  I   Yes   No  Checked by Date   Implemented?   Remarks  I   Yes   No  2nd Verification of Action       Yes     No  Effectiveness of Action         Yes     No  If no same defects / problems occurs for 5 consecutive delivenes, corrective action is considered effective / closed. If the same problem occurs within 5 consecutive deliveness 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, GLOSURE:  Status: Remarks: Approved by: Process Owner Acknowledgment; (Receiving Section)  Closed	I										
Total Good Rework Percentage (Good)  II. QA ROOTGAUSE VERIFICATION (To botifiled out by QA Injectarge) Identified Rootcause  Recommendation  III. QA ROOTGAUSE VERIFICATION (To botifiled out by QA Injectarge) III. QA ROOTGAUSE VERIFICATION (To botifiled out by QA Injectarge)  Recommendation  III. QA ROOTGAUSE VERIFICATION (To botifiled out by QA Insertage)  Recommendation  III. QORRECTIVE ACTION VERIFICATION (To botifiled out by QA Insertage)  Checked by  Date Implemented? Remarks  I   Yes     No  I   Yes     No  I   Yes     No  I   Yes     No  Reflectiveness of Action  I   Yes     No  I   Yes     No  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 stift 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)	C. Reworking			Yelder (1997)							
Rework Percentage (Good)  III. QA ROOTGAUSE VERIFICATION (To berilled out by QA in-charge).  III. QCRRECTIVE ACTION VERIFICATION (To be filled out by QA in-charge).  IIII. QCRRECTIVE ACTION VERIFICATION (To be filled out by QA in-charge).  Checked by Date Implemented? Remarks  Ist Verification of Action  [ ] Yes [] No  2nd Verification of Action  [ ] Yes [] No  Effectiveness of Action  [ ] Yes [] No  If yes [] No  Mote: 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. QLOSURE  Status: Remarks: Approved by: Process Owner Acknowledgment: (Receiving Section)		ity					Process				
III. CORRECTIVE ACTION VERIFICATION (To be filled out by OA In-charge)  IIII. CORRECTIVE ACTION VERIFICATION (To be filled out by QA In-charge)  Checked by Date Implemented? Remarks  Ist Verification of Action  I ] Yes [] No  2nd Verification of Action  I ] Yes [] No  Srd Verification of Action  I ] Yes [] No  Effectiveness of Action  I ] Yes [] No  Mote: If no same defects / problems occurs for 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. GLOSURE  Status: Remarks: Approved by: Process Owner Acknowledgment: (Receiving Section)						**					
Ill. CORRECTIVE ACTION VERIFICATION (To be filled out by/QA in-charge)  Checked by Date implemented? Remarks  1st Verification of Action [] Yes [] No  2nd Verification of Action [] IYes [] No  3rd Verification of Action [] IYes [] No  Effectiveness of Action [] IYes [] No  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)											
iii. CORRECTIVE ACTION VERIFICATION (To be filled out by OA In-charge)  Checked by Date Implemented? Remarks  I st Verification of Action	II. QA R	OOTGAUSEV	ERIFICATION	(To be filled o	out by QA In-cl	harge)	Date Conducted: PIC:				
Status:  Checked by  Date  Implemented?  Remarks  1st Verification of Action  [] Yes [] No  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)			identified R	lootcause				Recommendation			
Checked by Date Implemented? Remarks  1st Verification of Action         Yes       No    2nd Verification of Action											
Checked by Date Implemented? Remarks  1st Verification of Action         Yes       No    2nd Verification of Action											
Status:  Checked by  Date   Implemented?   Remarks    Institution of Action											
Status:  Checked by  Date   Implemented?   Remarks    Institution of Action						411					
1st Verification of Action [] Yes [] No 2nd Verification of Action [] Yes [] No 3rd Verification of Action [] Yes [] No Effectiveness of Action [] Yes [] No  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				III. CORRE	CTIVE ACTIO	N MERIFICATI	ON (To be fil	led out by QA I	n-charge).		
2nd Verification of Action  [ ]Yes [ ]No  Effectiveness of Action  [ ]Yes [ ]No  [ ]Yes [ ]No  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)			Check	ed by	Date	Implen	nented?		Remarks		
2nd Verification of Action  [ ]Yes [ ]No  Effectiveness of Action  [ ]Yes [ ]No  [ ]Yes [ ]No  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)	1st Verification	on of Action				I 1Yes	f 1No				
3rd Verification of Action  [] Yes [] No  Effectiveness of Action  [] Yes [] No  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. GLOSURE  Status: Remarks: Approved by: Process Owner Acknowledgment: (Receiving Section)											
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Effectiveness of Action  [ ] Yes											
Effectiveness of Action  [ ] Yes	3rd Verificati	on of Action				f 1Yes	I 1No				
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. GLOSURE  Status: Remarks: Approved by: Process Owner Acknowledgment: (Receiving Section)  Closed	-,-,-						. ],				
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Status: Remarks: Approved by: Process Owner Acknowledgment: (Receiving Section)											
Status: Remarks: Approved by: Process Owner Acknowledgment: (Receiving Section)  Closed	Note: If no s deliveries or	ame defects / j	problems occur of action still r	s for 5 consec not yet implem	ulive deliveries ented, Investiga	, corrective act	lion is conside nall be re-issue	red effective / cl ed to the affecte	osed. If the same problem of d department to provide new	ccurs within 5 consecutive improvement action.	
Status: Remarks: Approved by: Process Owner Acknowledgment: (Receiving Section)  Closed							SOURCE				
Closed						10/00/0	VEID KIE				
Still Open	Status;		Remarks:						Process Owner Acknowle	dgment: (Receiving Secti	
I DA Supervisor I DA Anni Manager I Line Leader I December I Line Leader			Remarks;						Process Owner Acknowle	agment: (Receiving Secti	
QA Supervisor QA Asst. Manager Line Leader Department Head  Re-Issue IRF Date: Date: Date: Date:	25550		Remarks:		0.4.5	Appro	ved by:	d Monograf			