

**KANEPACKAGE PHILIPPINE INC.**

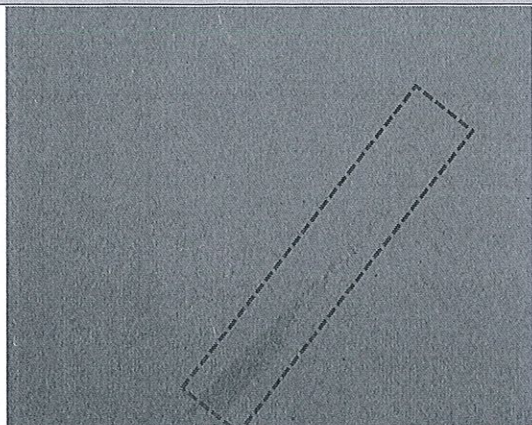
No. 5 Ring Road LISP II, Brgy. La Mesa, Calamba City, Laguna
Telephone No. (049) 545-7166 to 69
Fax No. (049) 545-6302

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

Control No.: 432

Date Issued: 21 06 09

| | | | |
|------------------|----------------|-------------------|----------------------|
| Customer | CANON | Attention To | Mr. Gerald De Guzman |
| Item Code | FX2-5524-000 | Department | PRODUCTION |
| Item Description | Z10 BOX OUTER | Date of Detection | 21 06 08 |
| Job Order Number | 10-F-21-183-19 | Section Detected | QA - IN LINE |

ILLUSTRATION OF THE PROBLEM☐ Major ☐ Minor

| | | |
|---------------------|------------------------|-------------------|
| Lot Quantity (pcs.) | Reject Quantity (pcs.) | Reject Percentage |
| 1011 | 36 | 3.56% |

Nature of Defect:

GLUE STAIN

Requirement:

Maximum of 30mm by 30mm

Actual:

Glue stain is >30mm

| NO. OF OCCURRENCE | DISPOSITION | AREA OF OCCURRENCE / ORIGIN | CONTENT |
|---|--|---|--|
| <input checked="" type="checkbox"/> First <input type="checkbox"/> Recurrence No.: _____ Date: _____ | <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 type="checkbox"/> EQOS <input type="checkbox"/> Diecut <input type="checkbox"/> Detaching <input checked="" 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 Adrian Vergara QA-IE Staff | Checked by Mr. Roderick Ramos QA Supervisor | Approved by Mr. Rexel Almario QA Asst. Manager | Received by (Receiving Section) Mr. Gerald De Guzman 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: | pls. see attached | Why 1: | pls. see attached |
| | Why 2: | | Why 2: | |
| | Why 3: | | Why 3: | |
| | Why 4: | | Why 4: | |
| | Why 5: | | Why 5: | |
| Design / Toolings | Why 1: | pls. see attached | Why 1: | pls. see attached |
| | Why 2: | | Why 2: | |
| | Why 3: | | Why 3: | |
| | Why 4: | | Why 4: | |
| | Why 5: | | Why 5: | |
| Process / Material | Why 1: | pls. see attached | Why 1: | pls. see attached |
| | Why 2: | | Why 2: | |
| | Why 3: | | Why 3: | |
| | Why 4: | | Why 4: | |
| | Why 5: | | Why 5: | |

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

pls. see attached

OUTFLOW ROOTCAUSE

pls. see attached

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 | N/A | | | |

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

pls. see attached

B. Orientation

| | | | |
|-----------|---|------|------------|
| Date | 21 06 14 | Time | See in MOM |
| Title | ORIENTATION TO MANUAL GLUING OPERATORS REGARDING FREQUENCY OF CHECKING & CLEANING & WI-FR 002-078 | | |
| Attendees | Gluing operators | | |

Design / Tools

pls. see attached

C. Reworking

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

Process

pls. see attached

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

Date Conducted: 21 06 14 PIC: A. Vergara

Identified Rootcause**Recommendation**

> There was a contamination of glue from conveyor belt because it was contaminated from over applied glue in other carton box

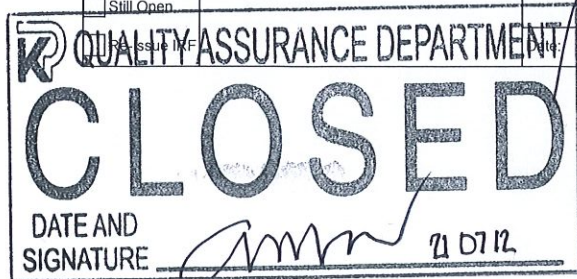
III. CORRECTIVE ACTION VERIFICATION (To be filled out by QA In-charge)

| | Checked by | Date | Implemented? | Remarks |
|----------------------------|------------|----------|---|---------------------|
| 1st Verification of Action | A. Vergara | 21 06 14 | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | C.A. is implemented |
| 2nd Verification of Action | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 3rd Verification of Action | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Effectiveness of Action | A. Vergara | 21 07 10 | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | C.A. 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.

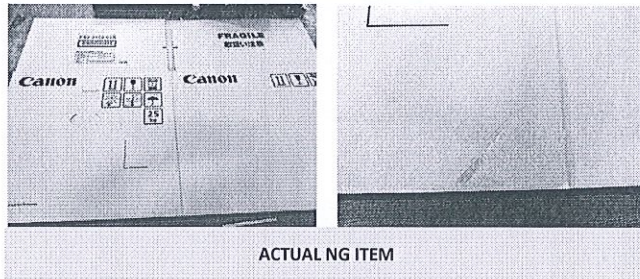
IV. CLOSURE

| Status: | Remarks: | Approved by: | Process Owner Acknowledgment: (Receiving Section) |
|---|----------|-------------------------------------|---|
| <input checked="" type="checkbox"/> Closed <input type="checkbox"/> Still Open | | QA Supervisor Date: 21 07 12 | IRISH MAY L. ESTARERA Line Leader Date: 21 07 12 Department Head Date: 21 07 12 |

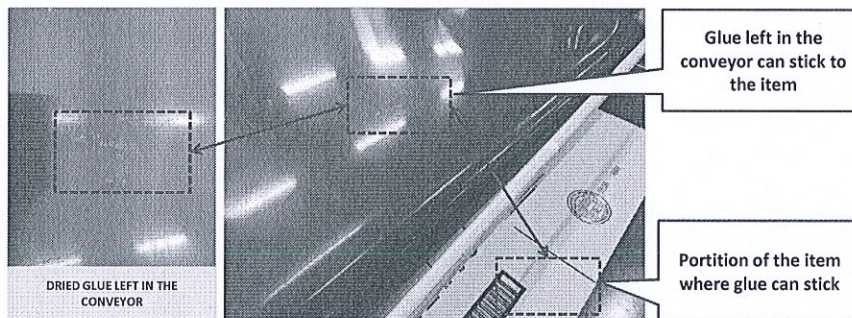


INVESTIGATION REPORT FOR GLUE STAIN

| | |
|-------------------------|--|
| DIRECT CAUSE | W1- Due to the manual application of glue in the item, possible that the operator applied glue unevenly in the upper portion of the glue tab, possibly applied glue is thicker. |
| PROCESS/MATERIAL | W2- Once the item is inserted in the conveyor, the glue tab is pressed, and excess glue might stained on the conveyor. And excess glue stain in the conveyor can stick to the item while the machine is rotating. |



ACTUAL NG ITEM



| | |
|--|--|
| INDIRECT CAUSE (OUTFLOW) PROCESS/MATERIAL | W1- Operator did not notice the glue stain since Conveyor is continuously rotating and we have one operator for feeding only. |
|--|--|

PRODUCTION CORRECTIVE ACTION

>Since the process is manual, orient the operator to have first, middle and last process for 100pcs and below while 5pcs for every 100pcs with big quantity processed. Conduct machine cleaning for every start of the shift.
>Re-orient Work Instruction for Manual Gluing.

| | | | |
|------|------------|--------------|--------------------------------|
| PIC: | PRODUCTION | TARGET DATE: | FOR DISCUSSION IN 3-PM MEETING |
|------|------------|--------------|--------------------------------|

PREPARED BY:

Judy Ann Sarmiento
JUDY ANN SARMIENTO
PROD IE STAFF







APPROVED BY:

Weena V. Apalla
WEENA V. APALLA
SR. SUPERVISOR
2/10/16

MINUTES OF THE MEETING

Date: 210614 Time Start: 12:52PM / 8:15P.M. Time Finished: 12:59PM / 8:20P.M. Venue: MANUAL GLUING

ATTENDEES:

| Name | Dept. | Sign | Name | Dept. | Sign |
|--------------------|--------|---|------|-------|------|
| Gina de Cerna | Gluing |  | | | |
| EDUARDO BON - MULA | GLUING |  | | | |
| JUMEL S. BELL | GLUING |  | | | |
| CHARLTON V. TAMALA | GLUING |  | | | |
| MARGAY M. ESPANOLA | |  | | | |
| ANDREW R. INTIA II | |  | | | |

AGENDA: **ORIENTATION TO MANUAL GLUING OPERATORS REGARDING FREQUENCY OF CHECKING ON ITEM AND CLEANING OF CONVEYOR AND MANUAL GLUING WORK INSTRUCTION**

MINUTES:

page ____ of ____

>Operator should check on first and middle of the process for items with quantity of 100pcs and below, and 5pcs for every 100pcs with big quantity processed.

>Conduct Machine Cleaning especially in Conveyor for before start of the shift.

FOLLOW UP MEETING:

(date & time)

for KPPI fill up only

Prepared by:


JUDY ANN B. CARMIENTO

Reviewed by:

Noted by: