



ATTENDANCE SHEET

Submitted by:

Jason Aquino

Date:

July 05, 2024

ACTIVITY

Production meeting, discuss the IRF from OA highlighting the declassification issue & its improvement.

Attendees

	FIRST NAME	LAST NAME	DIV. / DEPT.	SIGNATURE
1	Willent	Fatalla	Prod'n	
2	NORIEL	ARCOPEZ	PROD	
3	Mark Louie	Bayani	Prod	
4	JOHN LOUIE	ABRENICA	PROD	
5	Mark Vincent	Estipona	Prod	
6	Lu	Valera	Prod	
7	Gilbert	Dotado	Prod.	
8	JERWIN	ARPOH	PROD'N	
9	Almer	Magnay	Prod	
10	MARK MEZ	PAMOR	PROD	
11	JOSEPH	TIPMISM	Prod	
12	ALBERT	ALMIRH	Prod	
13	Paul	Aredo	Prod	
14				
15				
16				
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21				
22				
23				

ATTENDANCE SHEET

Date: 10/10/2014

Time: 8:00 AM

Activity: 10:00 AM - 12:00 PM

Activity: 1:00 PM - 3:00 PM

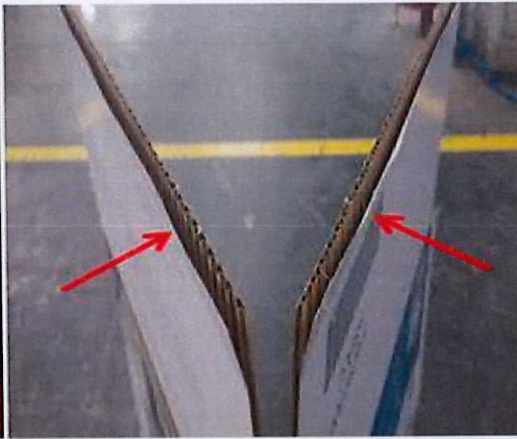
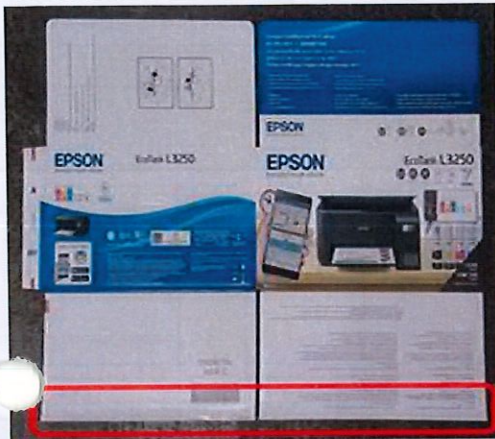
Activity: 3:30 PM - 5:00 PM

Activity: 5:30 PM - 7:00 PM

FIRST NAME	LAST NAME	DIV / DEPT.	SIGNATURE
1			
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Item Code	5162977-00	Customer	EPPI
Item Description	LOUVRE 2 MDX ASIA;C	Delivery Date	N/A
Detection (Section / Area)	INLINE QA M1/NS	Job Order Number	JO-38667
Inspection Date	18/06/2024	External Provider	IN-HOUSE
Affected Quantity	37/1979 2.00%	Date Received	N/A
Problem Description	DELAMINATION	Delivery Receipt Number	9414

II. Visual Reference (Defect Illustration)



DELAMINATION
DETECTED IN SEMI AUTO 1
PROCESS ON JUNE 18, 2024
LAMINATION 2 DS
WITH 37/1979

III. Documented Information Review (To be filled out by QA Line leader)

Related Doc. Info.	Control Number	Requirement:	ITEM SHOULD BE IN GOOD CONDITION; NO OCCURRENCE OF DELAMINATION
<input type="checkbox"/> Procedure Manual :		Actual:	DELAMINATION ON LOWER FLAP CLASS B/C PANEL A
<input type="checkbox"/> Technical Drawing :		Conclusion and Recommendation:	CHECKING VISCOSITY OF GLUE CHECKING OF PALLETIZING / WEIGHTS
<input type="checkbox"/> Work Instruction :			<input type="checkbox"/> Applicable <input type="checkbox"/> Not Applicable
<input type="checkbox"/> Job Order :			
<input type="checkbox"/> Reports :			
<input type="checkbox"/> Defect Limit :			

IV. Initial Disposition (To be filled out by ME Department If Needed)

<input type="checkbox"/> Good	<input type="checkbox"/> Conditional (Please indicate details)	<input checked="" type="checkbox"/> Rejected	<input type="checkbox"/> Conditional (Please indicate details)
<input checked="" type="checkbox"/> Rejected		<input type="checkbox"/> Backload	
<input type="checkbox"/> Backload		<input type="checkbox"/> Good	
		<input type="checkbox"/> For Sorting	
		<input type="checkbox"/> For Rework	
		Person In Charge	Target Date
			Signature

Remarks:

for rework

Detected by	Checked by	Initial Approved by (If Needed)	Noted by	Approved by
A.SARMIENTO	R.MANALO			
QA Inspector	QA Line Leader	ME Supervisor	QA Supervisor	QA Head

Important: Backloading Policy (External Provider Rejects)

Rejection rate that is more than 80% of the total quantity shall be approved by Top Management before backloading.

Evaluation

- ☐ <80% No Need
☐ >80% Need

Approved by

Top Management

Final Disposition

- ☐ Backload
☐ Accept
☐ Other _____

**KANEPACKAGE PHILIPPINE INC.**

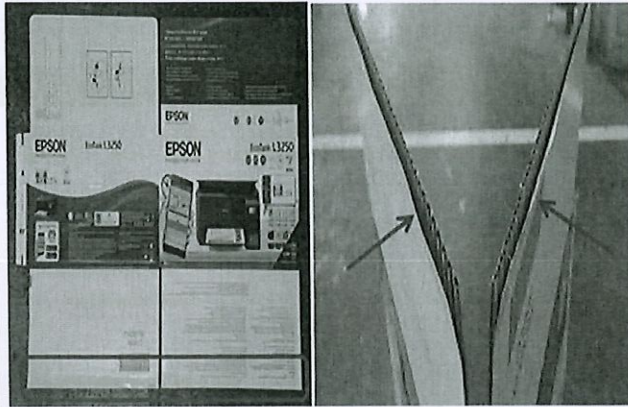
No. 5 Ring Road LISP II, Brgy. La Mesa, Calamba City, Laguna
Telephone No. (049) 545-7166 to 69
Fax No. (049) 545-6302

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

Control No.: IRF-24-06-0034

Date Issued: 19-Jun-24

Customer	EPPI-IJP	Attention To	N. Cepeda/R. Almario
Item Code	5162977-00	Department	KPLima Production
Item Description	LOUVRE 2 MDX ICB FOR ASIA	Date of Detection	18-Jun-24
Job Order Number	38666	Section Detected	INLINE QA M1/NS

ILLUSTRATION OF THE PROBLEM

<input checked="" type="checkbox"/> Major	<input type="checkbox"/> Minor	
Lot Quantity (pcs.)	Reject Quantity (pcs.)	Reject Percentage
297	16	5.39%

Nature of Defect:

DELAMINATION

ITEM SHOULD BE IN GOOD CONDITION; NO OCCURRENCE OF DELAMINATION

Actual:DELAMINATION WAS ENCOUNTERED ON THE ITEM
(PLEASE SEE ATTACHED PICTURE)

NO. OF OCCURRENCE	DISPOSITION	AREA OF OCCURRENCE / ORIGIN	CONTENT
<input checked="" type="checkbox"/> First	<input type="checkbox"/> Hold	<input type="checkbox"/> Slotter	<input type="checkbox"/> Material
<input type="checkbox"/> Recurrence	<input checked="" type="checkbox"/> Special Acceptance	<input type="checkbox"/> EQOS	<input type="checkbox"/> Dimension
No.:	<input type="checkbox"/> For Rework	<input type="checkbox"/> Diecut	<input type="checkbox"/> Appearance
Date:	<input type="checkbox"/> Reject / Disposal	<input type="checkbox"/> Detaching	<input checked="" type="checkbox"/> Process / Method
		<input type="checkbox"/> Gluing	
		<input type="checkbox"/> Vertical	
		<input checked="" type="checkbox"/> Others:	
		LAMINATION 2	
Issued by	Checked by	Approved by	Received by (Receiving Section)
M. Archibevo QA Staff	G. Magsino QA Supervisor	QA Asst. Manager	N. Cepeda/R. Almario Head/ Supervisor/ Manager

I. INVESTIGATION / ANALYSIS

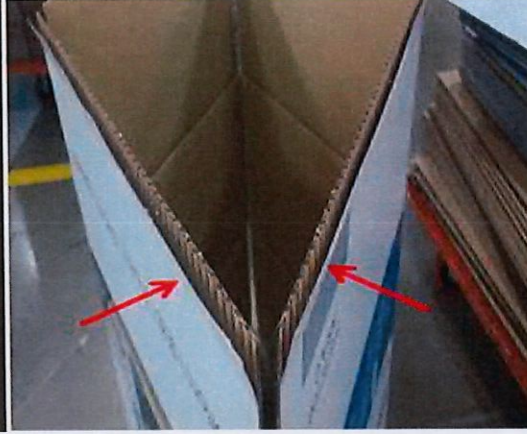
	DIRECT CAUSE: (Analyze the reason of occurrence, why it happened?)	INDIRECT CAUSE: (Analyze the reason of occurrence, why it leaked?)
System / Training	Why 1: Why 2: Why 3: see attached file Why 4: Why 5:	Why 1: Why 2: Why 3: see attached file Why 4: Why 5:
Design / Toolings	Why 1: Why 2: Why 3: Why 4: Why 5:	Why 1: Why 2: Why 3: Why 4: Why 5:
Process / Material	Why 1: Why 2: Why 3: Why 4: Why 5:	Why 1: Why 2: Why 3: Why 4: Why 5:

Target Date: 21 June 2024

<input type="checkbox"/> Re-Issue IRF <input type="checkbox"/> Still Open <input type="checkbox"/> Closed		Date: _____ QA Supervisor		Date: _____ QA Asst. Manager		Date: _____ Line Leader		Date: _____ Department Head	
Status:		Remarks:		Approved by:		Process Owner Acknowledgment: (Receiving Section)			
IV. CLOSURE									
Note: If no same defects / problems occurs for 5 consecutive deliveries, correct 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 provide new improvement action.									
1st Verification of Action		[] Yes [] No							
2nd Verification of Action		[] Yes [] No							
3rd Verification of Action		[] Yes [] No							
Effectiveness of Action		[] Yes [] No							
Checked by		Date		Implemented?		Remarks			
III. CORRECTIVE ACTION VERIFICATION (To be filled out by QA In-charge)									
Identified Rootcause					Recommendation				
II. QA ROOTCAUSE VERIFICATION (To be filled out by QA In-charge)									
Date Conducted:		PIC:		Process		Rework Quantity		Total Good	
						Rework Percentage (Good)			
B. Orientation									
RM		WIP		FG		Location		Total Stock	
NG		Total Good							
A. Sorting Result									
Actions to be done to eliminate recurrence		Who / When		System		Design / Tools		Process	
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)									
OCCURRENCE ROOTCAUSE					OUTFLOW ROOTCAUSE				
FINAL CONCLUSION									
INVESTIGATION REPORT FORM (IRF)					KANEPACKAGE PHILIPPINE INC.				

Item Code	5162977-00	Customer	EPPI
Item Description	LOUVRE 2 MDX ASIA;C	Delivery Date	N/A
Detection (Section / Area)	INLINE QA M1/NS	Job Order Number	JO-38666
Inspection Date	18/06/2024	External Provider	IN-HOUSE
Affected Quantity	16/297 5.38%	Date Received	N/A
Problem Description	DELAMINATION	Delivery Receipt Number	9335

II. Visual Reference (Defect Illustration)



41 IRF 11110000 24-06-19
IRF-24-06-0634

DELAMINATION
DETECTED IN SEMI AUTO 1
PROCESS ON JUNE 18, 2024
LAMINATION 2 DS
WITH 16/297

III. Documented Information Review (To be filled out by QA Line leader)

Related Doc. Info.	Control Number	Requirement:	ITEM SHOULD BE IN GOOD CONDITION; NO OCCURRENCE OF DELAMINATION
<input type="checkbox"/> Procedure Manual :		Actual:	DELAMINATION ON LOWER FLAP CLASS B/C PANEL B
<input type="checkbox"/> Technical Drawing :		Conclusion and Recommendation:	CHECKING VISCOSITY OF GLUE CHECKING OF PALLETIZING / WEIGHTS
<input type="checkbox"/> Work Instruction :			<input type="checkbox"/> Applicable
<input type="checkbox"/> Job Order :			<input type="checkbox"/> Not Applicable
<input type="checkbox"/> Reports :			
<input type="checkbox"/> Defect Limit :			

IV. Initial Disposition (To be filled out by ME Department If Needed) V. Final Disposition

<input type="checkbox"/> Good	<input type="checkbox"/> Conditional (Please indicate details)	<input checked="" type="checkbox"/> Rejected	<input type="checkbox"/> Conditional (Please indicate details)
<input checked="" type="checkbox"/> Rejected		<input type="checkbox"/> Backload	
<input type="checkbox"/> Backload		<input type="checkbox"/> Good	
		<input type="checkbox"/> For Sorting	
		<input type="checkbox"/> For Rework	
		Person In Charge	Target Date
			Signature

Remarks:

for rework

Detected by	Checked by	Initial Approved by (If Needed)	Noted by	Approved by
A. SARMIENTO	R. MANALO			
QA Inspector	QA Line Leader	ME Supervisor	QA Supervisor	QA Head

Important: Backloading Policy (External Provider Rejects)

Rejection rate that is more than 80% of the total quantity shall be approved by Top Management before backloading.

Evaluation

- ☐ <80% No Need
☐ >80% Need

Approved by

Top Management

Final Disposition

- ☐ Backload
☐ Accept
☐ Other _____

Note: All details must be filled out completely.
Submit this form to Line Leader immediately after accomplishment.

ABNORMALITY REPORT

VI. Item Information

Item Code	5162977-00	Customer	EPPI
Item Description	LOUVRE 2 MDX ASIA;C	Delivery Date	N/A
Detection (Section / Area)	INLINE QA M1/NS	Job Order Number	JO-38667
Purchase Order Number		External Provider	IN-HOUSE
Delivery Receipt Number	9414	Item Date Received	N/A

VII. Sorting Instructions

VIII. Sorting Details

Sorting Date	Sorting Time		No. of Man-power	Lot Number	Sorted Quantity	Reject Quantity	Defect Name	Sorted by
	Start	End						
		Total Sorting Hours	Total No. of Manpower	Total Sorted Quantity	Total Reject Quantity	Total Good Quantity	Rejection Rate (%)	
Sorting Result								
R&R Verification								

IX. Reworking Instructions

X. Reworking Result

Reworking Date	Reworking Time		# of Man-power	Lot Number	Reworked Quantity	Good Quantity	Reject Quantity	Rejection Rate (%)
	Start	End						
Reworked by / Department				Endorsed to / Department				

XI. Reinspection Result

Reinspection Date	Reworking Time		# of Man-power	Lot Number	Reinspected Quantity	Good Quantity	Reject Quantity	Rejection Rate (%)
	Start	End						
Inspected by			Verified by		Noted by		Approved by	
QA Inspector			QA Line Leader/Sub-Leader		QA Supervisor		QA Head	

Note: All details must be filled out completely.
Submit this form to Line Leader immediately after accomplishment.

KANEPACKAGE PHILIPPINE INC. No. 5 King Road (LSP II), Brgy. La Mesa, Cebu City, Laguna Telephone No. (048) 545-7166 to 69 Fax No. (048) 545-4302		INVESTIGATION REPORT			
		Prepared By:		Checked By:	
DATE: July 02, 2024		G. J. JAVIER PROD L		M. CEPEDA PROD SV	
		Approved By: R. ALVARADO KPLIMA Operations Prod Mgr.			

5M REVIEW		DOCUMENT REVIEW			
MAN	No Changes	Affected Document:	Date Reviewed:	Disposition:	PIC:
MACHINE	No Changes	Procedure Manual		<input type="checkbox"/> With Revision <input type="checkbox"/> No Revision	K.N.ACUIN
MATERIAL	No Changes	Work Instruction		<input type="checkbox"/> With Revision <input type="checkbox"/> No Revision	K.N.ACUIN
METHOD	No Changes	Process Flow	240510	<input type="checkbox"/> With Revision <input type="checkbox"/> No Revision	K.N.ACUIN
ENVIRONMENT	No Changes	Forms		<input type="checkbox"/> With Revision <input type="checkbox"/> No Revision	K.N.ACUIN
					Target Date:
					N/A
					N/A
					N/A
					N/A

I. PROBLEM DESCRIPTION
1.1. ISSUE:
 DELAMINATION
1.2. ITEM DESCRIPTION:
 PART CODE: 5163785-00 / 5162977-00
 PART NAME: LIME 2 FB ICB FOR AMERICA / LOUVRE 2 MDX ICB FOR ASIA
1.3. BACKGROUND:

PICTURE

DETAILS:
 >Inhouse Detection : DELAMINATION
 >Lot size: 698PCS / 297PCS / 148PCS
 >Reject Qty: 40PCS / 16PCS / 14PCS
 >Rejection Rate: 5.73% / 5.39% / 9.46%
 >JO#: 35657 / 39433 / 38666

IMMEDIATE ACTION
PROCESS FLOW CHART

```

graph LR
    Start((Start)) --> LAMINATION[LAMINATION]
    LAMINATION --> DIECUT[DIECUT]
    DIECUT --> GLUING[GLUING]
    GLUING --> INSPECTION[INSPECTION]
    INSPECTION --> WHS[WHS (STORAGE)]
    WHS --> LOADING[LOADING]
    LOADING --> DELIVERY[DELIVERY]
    DELIVERY --> End((End))
          
```

ACTION ITEMS	Target Date:	Person In-charge
MEETING WITH CONCERN OPERATOR	JULY 05, 2024	PRODUCTION LEADER

III. CAUSE ANALYSIS:

WHY 1:	WHY DILAMINATION OCCURED? BECAUSE ITEM HAS WARP CONDITION.
WHY 2:	WHY ITEM HAS WARP CONDITION. BECAUSE DURING ISSUANCE OF RAW MATERIALS OPERATOR NOTICE THAT ITEM HAS NO PROVIDED WEIGHTS AT THE TOP OF IT.
WHY 3:	WHY DURING ISSUANCE OF RAW MATERIALS OPERATOR NOTICE THAT ITEM HAS NO PROVIDED WEIGHTS AT THE TOP OF IT. BECAUSE NO AVAILABLE WEIGHTS TO BE USED DURING RECEIVING OF ITEM.
WHY 4:	WHY NO AVAILABLE WEIGHTS TO BE USED DURING RECEIVING OF ITEM. BECAUSE ALL WEIGHTS ALREADY USED BY PRODUCTION UPON PROCESSING OF ITEM, CURRENT QUANTITY OF WEIGHTS ARE NOT ENOUGH TO CATER THE RECEIVING & PROCESSED ITEM.
WHY 5:	

IV. ACTION PLAN:

1	CONDUCT MEETING REGARDING ON ENCOUNTERED PROBLEM OF DELAMINATION.	PIC: PRODUCTION LEADER July 05, 2024
2	REHIND OPERATOR TO AVOID PROCESS THE ITEM WITH WARP PROBLEM ALSO COORDINATE TO QA TO PROVIDE WEIGHTS AT THE TOP OF THE ITEM TO AVOID WARPAGE PROBLEM, ITEM W/ WARP OCCURRENCE WILL BE SUBJECT FOR REPALLETIZING & PROVIDE PROPER WEIGHTS.	PIC: PRODUCTION LEADER July 05, 2024
3	TO SCHEDULE PRODUCTION TO DO ADDITIONAL WEIGHTS ENOUGH FOR PRODUCTION & QA USAGE.	PIC: PRODUCTION LEADER July 12, 2024

V. EVIDENCES:

