

## NONCONFORMING QUALITY REPORT

Search of problem :         INVOICE ORDER : TOTAL DEL : KGS TOTAL CLAIM : KGS	<input type="checkbox"/> Claim:	Delivery Date	
	<input type="checkbox"/> Complaint[Information]	Dec 15 2021	
	location Claim occur	Disposition of inventory	
	<input type="checkbox"/> Receiving Insp	At customer	At PT. KYBI
	<input type="checkbox"/> In-Process	<input type="checkbox"/> Sorted by Customer (.....)	<input type="checkbox"/> Sorted by Supplier Date:_____
	<input type="checkbox"/> Customer (.....)	<input type="checkbox"/> Sorted by Supplier Date:_____	<input type="checkbox"/> Q Sorted by PT.KYBI
		(please come to PT KYB)	(please come to PT KYB)
	<input type="checkbox"/> Sorted by PT.KYBI	<input type="checkbox"/> Q Keep to use	
	<input type="checkbox"/> Keep to use		

Fill in by Supplier

PROBLEM IDENTIFICATION			SUPPLIER:		VERIFICATION		
ROOT CASE	TEMPORARY ACTION & PERMANENT ACTION	SCHEDULE	Approved:	M-1	M-2	M-3	
Prepared:			Checked:	REMARK:			
				JUDGE: Q OK Q NG	SIGN		

**Bold Line to be filled by PT.KYBI**

Route: QA Receiving Insp.PTKYBI -> Supplier -> VD PT.KYBI -> QA Receiving PT.KYBI