



# WHISTLEBLOWING POLICY COMPLAINT/DISCLOSURE FORM

EXH.01

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STRICTLY CONFIDENTIAL



## COMPLAINT/DISCLOSURE FORM

NOTE: PLEASE PROVIDE DETAILED INFORMATION AS MUCH AS POSSIBLE

### COMPLAINANT'S INFORMATION

NAME:		OFFICE ADDRESS:		
SIGNATURE / DATE	EMPLOYEE NO.	E-MAIL ADDRESS:		
COMPANY/DEPARTMENT	DESIGNATION	PHONE NO.	MOBILE NO.	FAX NO.

### INFORMATION CONCERNING THE COMPLAINT

*What is the major issue involved?*

- Violations of Corporate Governance Rules
- Financial and Procedural Malpractice
- Violations of the Code of Discipline
- Others (Please specify)

*What happened? (Please attach additional sheet(s) if necessary)**How did you know about the subject of the complaint(s)?*

- Personal or direct knowledge
- Others have told me about it
- Others (Please specify)

*Please indicate the physical evidences/ documentations that may support your disclosure.*

Documents attached:	No. of Pages
1.	
2.	
3.	

*Who is/are the person(s) involved? (Respondent/s) (Please attach additional sheets if necessary)*

NAME	DESIGNATION	COMPANY	DIVISION/GROUP/DEPT.	NATURE OF INVOLVEMENT

*Who is/are the possible Witness(es)? (Please attach additional sheets if necessary)*

NAME	DESIGNATION	COMPANY	DIVISION/GROUP/DEPT.	NATURE OF INVOLVEMENT

*When did the incident take place?*

Date/Time/Frequency

*Since when has this been occurring?**Location of evidence:**How much is involved? Please provide an approximate figure.**Why are you making this disclosure? (Please attach additional sheet if necessary)*

### DISCLOSURE HISTORY

*Was the disclosure previously reported to a management level? If yes, to whom was it reported?**What do you think was the reason for lack of immediate action?*

PLEASE ADVISE ON HOW WE MAY CONTACT YOU

- BY PHONE
- THROUGH E-MAIL
- OTHERS (SPECIFY)