

## WHISTLEBLOWING FORM

	REFERENCE NUMBER :
<b>A. DISCLOSURE DETAILS</b>	
<b>1 PARTY INVOLVED IN CONCERN RAISED</b> (You may insert information on additional individuals involved in a separate sheet)	
a. Name of Party	
b. Designation	
c. Division/Company	
d. How do you know this Party ?	
<b>2. DETAILS OF CONCERN</b> (You may use additional sheets if necessary)	
a. Name of Party	
b. Designation	
<b>3. SUPPORTING INFORMATION TO ASSIST INVESTIGATIONS</b> (Please attach supporting evidence to substantiate your disclosure and assist in investigation. You may use additional sheets for additional witnesses or supporting evidence if necessary)	
a. Witness	Name : Department :
b. Supporting Evidence	
<b>B. REPORTING TO OTHER PARTIES</b>	
1. Have you raised your concern to any other person / department / authority? (Tick whichever applicable)	Yes <span style="margin-left: 200px;">No</span>
If yes, please state the person/department/authority the report was made/lodged and insert the date of the report. You may attach a copy of the report made.  -----	
<b>C. PARTICULAR OF WHISTLEBLOWER</b>	
a. Name	
b. Designation / Occupation	
c. Contact No	
d. E-mail Address	
e. Relationship with PMB Group (if not employee)	
<b>D. DECLARATION</b>	
I hereby declare that all information provided herein are made voluntarily and are true to the best of my knowledge, information and belief. I do understand that PMB shall use the information and materials provided herein throughout the process in accordance with the Group Whistleblowing Policy & Guidance Notes.  -----  (Signature)  Name :  Date :	

