Attachment

Whistleblower Form

Please complete following information:

- 1. Your Identification
 - (a) Department:

(b) Position/Title/Designation:

(c) Name:

(d) E-mail address:

(for communication with the Hotline)

- 2. Category of Information * (please tick at least one of the following boxes)
 - \Box a breach of applicable laws, regulations, or internal policies or rules;
 - □ improper use or misappropriation of company tangible or intangible assets (including, without limitation, money, goods, facilities, technical information and customer information);
 - □ wilful misinformation to third parties (including, without limitation, governmental or regulatory authority, suppliers and customers), superiors of the Company or any manipulation of Company's data or systems;
 - conduct offering or giving items of value to influence the actions of a person in governmental bodies, irrespective of whether it might have been believed to bring some benefit to the Company; and
 - □ conduct requesting or receiving items of value or gifts other than those of nominal value from suppliers or other business partners;
 - □ other (excluding personal grievances)
- 3. Information of the Person/Department concerned
 - (a) Department:

(c) Name:

Please fill in the above items to the extent you know.

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Managing Director

DATE: 3rd October 2024

- 4. Description of Information
 - (a) Date or Period of Conduct:
 - (b) Factual Description of Conduct:

(Please describe the conduct factually)

- (c) Has the above Information been reported to your boss or any other senior person in the Company in the past? Answer (yes or no): ---
- (d) If the answer to the above (c) is "Yes," please describe the date and person(s) you reported (to) and the results of your report.

Date of Report:

Person(s) reported to:

Results:

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Managing Director

DATE: 3rd October 2024

*This form can be downloaded from the Intranet------

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Managing Director

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