



**WHISTLE BLOWER REPORT FORM**

Please provide the following details for any suspected serious misconduct or any breach or suspected breach of law or regulation that may adversely impact the Company and submit the form directly to the whistle blowing unit. Please note that you may be called upon to assist in the investigation, if required.

**REPORTER'S INFORMATION**

**SUSPECT'S INFORMATION**

**Name:**

**Name:**

**Employee No:**

**Employee No:**

**Designation:**

**Designation:**

**Department:**

**Department:**

**Contact Numbers:**

**Contact Numbers:**

**COMPLAINT:** *Briefly describe the misconduct / improper activity and how you know about it. Specify what, who, when, where and how. If there is more than one allegation, number each allegation and use as many pages as necessary.*

**1. What misconduct / improper activity occurred? (use separate sheet if required)**

**2. When did it happen? When did you notice it? Where did it happen?**

**3. Is there any evidence that you could provide to whistle blowing unit?\* Or any other details or information which would assist in the investigation?**

**4. Are there any other employee / parties involved other than the suspect stated above?**

**5. Any other comments?**

Signature of the whistle blower

Date:

Designation:

CNIC No:

Thumb Impression