

WHISTLEBLOWING

WHISTLEBLOWER DETAILS	
Name and surname	
Role or position	
Telephone / Mobile	
Email	
REPORTED CONDUCT	
Date or period when the facts occurred	
Physical location where the facts occurred	<p>Site/Office: _____ (provide the name and location)</p> <p>Off-site location: _____ (provide the place and address)</p>
I believe that the actions or omissions committed or attempted:	<ul style="list-style-type: none"> ○ are in breach of civil or criminal law ○ are in breach of Model 321, the Code of Ethics, the Anti-Bribery Policy or other provisions that is punishable with disciplinary action ○ may cause financial harm to Cembre S.p.A. ○ may adversely affect Cembre S.p.A.'s image ○ may adversely affect employees, users or other parties that work at Cembre S.p.A. ○ other (specify)
Description of the facts, conduct or incident	
Person(s) responsible for the facts	<p>1. _____</p> <p>2. _____</p> <p>3. _____</p>

<i>Other parties aware of the facts and/or who can attest to the same</i>	1. _____ 2. _____ 3. _____
<i>Any documents that can confirm these facts</i>	
<i>Do you consent to your name being disclosed?¹</i>	<input type="radio"/> YES <input type="radio"/> NO
<i>Place</i>	
<i>Date</i>	
<i>Signature</i>	

¹In the event that you do not give your consent, as explained in the Procedure for the Management of Wrongdoing Reports (Whistleblowing Procedure), your right to confidentiality may however not apply where there are legal obligations or rulings by legal authorities.