

Internal Warning Form

An answer is required for all questions marked with an asterisk (*). Please answer even if the answer is negative or if the question is not applicable, in which case we kindly ask you to specify it. Any form that does not contain an answer to a mandatory question is inadmissible.

IDENTITY OF THE WHISTLEBLOWER

First name and family name* :

Phone no.:

E-mail address* :

You are* : an employee (permanent or fixed-term) an intern a temporary employee a director, managing director, legal representative or member of an executive or advisory board of a SOCOMEC Group entity

Your identity will remain strictly confidential and only those who investigate will be aware of it.

How would you prefer to be contacted?

At what time of the day do you prefer to be contacted?

Date of the internal warning submission* :

Have you already informed anybody of your concerns (manager, HRD, others)*?

If yes:

- Please specify the date on which you informed this person*:
- Please specify to whom and the form in which you provided this information*:

Description and chronology of reported events* :

How did you become aware of the reported facts? * ?

(Please tick)

- I have been personally involved
- I have witnessed it
- A colleague at work told me about it
- Someone outside the company told me about it
- It is a rumor
- I found a suspicious document or file
- Other (please specify):

Do you have any evidence*?

If so, which ones*?

Name of the employee(s) involved:

Name(s) of the victim(s) (if any):

Names of other witnesses to the reported facts (if any):

How did you get to know this internal warning procedure*?