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| WHISTLE-BLOWING FORM  |
| Please provide the following details to report any suspected misconduct. Please note that you may be called upon to provide clarification to assist with the investigation.   |
| Your details (optional) |
| Name  |   |
| Designation  |   |
| Company’s name  |   |
| Contact number  |   |
| Email address |   |
| Details of Individual / Entity Suspected of Misconduct  |
| Name  |   |
| Designation  |   |
| Identity number*(e.g. NRIC no. – individual; UEN – business)* |  |
| Registered address |  |
| Contact number |  |
| Email address |  |
| Witness details (if any)  |
| Name  |   |
| Designation  |   |
| Company’s name  |   |
| Contact number  |   |
| Email address |   |
|  Description of the Misconduct  |
| 1. What happened?    |
| 2. When did it happen and/ or when did you notice it?    |
| 3. Where did it happen?    |
| 4. How did it happen and/ or how did you notice it? |
| 5. Have you approached the person? If yes, what did he/she say or respond?    |
| 6. Were other people involved? If yes, who are they?    |
| 7. Is there any evidence that you could provide us?    |
| 8. Please provide any other details or information which would assist us in the investigation.    |
| 9. Have you reported the misconduct through other channels? If yes, to whom or which organisation you have made the report?    |
| Date:  | Signature:   |
| Please send the completed report to:  |
| E-mail: whistleblow@ibf.org.sg   | Mail: Risk and Governance10 Shenton Way #13-07/08 MAS Building, Singapore 079117  |

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# CONFIDENTIAL