



## WHISTLEBLOWING POLICY AND PROCEDURES

### WHISTLEBLOWER FORM

All disclosures related to Pacific & Orient Insurance Co. Berhad can be made by completing this Whistleblower Form and submitting it through any of the following designated recipients:

whistleblower@pacific-orient.com

Compliance Department  
 Mail : 11th Floor, Wisma Bumi Raya  
 No. 10, Jalan Raja Laut  
 50350 Kuala Lumpur

\* Mandatory information

| <b>SUBJECT OF COMPLAINT*</b>  |  |
|---|--|
| Allegation Details<br><br><i>(Please state the nature of allegation, where and when the alleged improper conduct took place and any other relevant details)</i><br><br><i>(Please use additional sheet if required)</i> |  |
| Other Parties Involved  |  |
| <b>WHISTLEBLOWER'S INFORMATION</b>  |  |
| Name  |  |
| NRIC No./Passport No.   |  |
| Designation   |  |
| Department  |  |
| Company   |  |
| Contact No.   |  |
| Email Address   |  |
| <b>INFORMATION ON PERSON YOU ARE REPORTING ON</b>   |  |
| Name*   |  |
| Designation   |  |
| Department  |  |
| Company   |  |
| Contact No.   |  |
| Email Address   |  |

