

WHISTLE BLOWING FORM

Tiong Nam Group takes a serious view of your personal data and is committed to protecting your privacy by maintaining the integrity of your personal data as defined by the Personal Data Protection Act 2010 ('the Act").

Upon completion of the following form and providing the Tiong Nam Group your personal data that relates to your identity and other information relating to you such as contact details and other personal information ("Personal Data"), you have willingly consented to the Tiong Nam Group to collect, view, store and to process your Personal Data in order to investigate and consider your concerns below with respect to Tiong Nam Group or any of its related companies and/ or employees. This may involve sending your Personal Data outside Malaysia for further investigation and evaluation as Tiong Nam Group operates in the ASEAN and China region.

Should you have any further inquiry on this subject matter, you may contact our Internal Audit Department.

PERSONAL PARTICUL	ARS				
Name:					
NRIC:					
Mobile Number:					
Email Address:					
Home Address:					
Preferred Contact Method:	Mobile Phone	🗆 Em	ail 🗆 H	lome address (snail mail)	
l am a(n):	Employee	Customer	□ Vendor	□ Member of the Public	□ Other:

COMPLETE THIS SECTION IF YOU ARE AN EXISTING EMPLOYEE		
Employee ID:		
Position:		
Department:		
Company:		

NATURE OF CONCERN	
 Financial or non-financial malpractices or impropriety (e.g. fraud, corruption, bribery, embezzlement and/ or theft) 	□ Failure to comply with laws and regulations
\Box Abuse and misrepresentation of power and authority	□ Harassment and intimidation, including sexual harassment
□ Serious conflict of interest without disclosure	□ Discrimination on the basis of gender, race, disabilities
□ Breach of Tiong Nam Group's Policies and/ or Code of Conduct and Ethics	□ Concealing information about any of the above malpractice or misconduct
□ Others (please specify):	



DETAILS REGARDING CON	CERN				
Specific persons with whom there are concerns: (Please be as specific and accurate with their names and positions)					
Details of your concern:					
Do you have supporting documents to attach to this form?	□ YES				
I declare that all information provided on this Whistle Blowing Form are correct and true. I understand that any false information provided can result in this report being disregarded, disciplinary action where applicable, and the case being brought to external authorities should it be deemed required.					
Signature:				Date:	

Please forward this form along with any supporting documents to:		
Head of Interna	I Audit: <u>whistleblowing@tiongnam.com</u>	
Or by mail: TIONG NAM LOGISTICS HOLDINGS BERHAD Attention: Head of Internal Audit Lot 30462, Jalan Kempas Baru, 81200, Johor Bahru, Johor MALAYSIA		
If the allegations any supporting d	pertain to the Head of Internal Audit, or any members of the Audit Committee, please forward this form along with ocuments to:	
Chairman of the	e Audit Committee: <u>AC_Chairman@tiongnam.com</u>	

INTERNAL USE ONLY: