

WHISTLEBLOWING

REPORTING TEMPLATE



The written report can be submitted by postal service by registered mail with acknowledgement of receipt.

In this case, in order to take advantage of the guarantee of confidentiality, it is necessary that the report be placed in two sealed envelopes, including, in the first, the identification data of the whistleblower, together with an identity document; in the second, the subject of the report; both envelopes must then be inserted in a third envelope bearing the words

"Whistleblowing report manager of National Molding Italia S.r.l. Confidential and Personal"

with the address of the Whistleblowing Manager

Avv. Gian Piero Chieppa Corso Re Umberto n. 2, 10121 Turin.

The registered letter will be opened exclusively by the Operator who will naturally guarantee the confidentiality of the identity of the whistleblower.

The report received will be registered and stored in a technical manner that will guarantee its security. To submit the report, the Whistleblower may decide to use this report form. The use of the form is not mandatory, and the choice is left to the Whistleblower.

It is recommended to respect the principle of minimization in the use of personal data, entering only the information useful to substantiate the fact that occurred.



I want to avail myself of anonymity		□ YES □ NO	
Name and Surname of the whistleblower			
Phone/Mobile			
E-Mail			
Qualification			
Date/period in which the event occurred			
Physical place where the event occurred			
	within the place of employment (indicate the name and address of the facility		outside the place of employment (indicate the name and address of the facility
I believe that the actions or omissions committed are		Employee Coprovisions disciplinary a likely to cause the Company likely to cause of the Company likely to employees of the cause of the Company likely to employees of the Company likely likel	in violation of the ode of Conduct or other punishable by ction se financial damage to t; e damage to the image any; cause prejudice to or other persons who neir activities at the
Description of the fact (conduct and event)			
Author(s) of the act			
Any other persons who are aware of the fact and/or able to report on it			
Documents supporting the report			
Other information that can provide useful feedback on the existence of the facts reported place			
Place, date and signature			

