

	LLC INFRA SDN BHD	LL HR 10
	<u>WHISTLE-BLOWING REPORTING FORM</u>	Revision No. : 00
		Effective Date : 10 July 2026
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Section 1 – Whistle Blower’s Information (Optional if anonymous)

Name	
Position / Relationship to Company	
Contact Number	
Email Address	

Section 2 – Report Details

Date of Report	
Type of Allegation - Tick the relevant allegation type(s)	☐ Bribery / Corruption ☐ Facilitation Payment ☐ Conflict of Interest ☐ Fraud / Financial Irregularity ☐ Improper Gift / Hospitality / Donation / Sponsorship / Political Contribution ☐ Other (please specify): _____
Description of Allegation	
Persons Involved (if known)	
Date (s) / Location (s) of Incident	
Evidence attached	☐ Yes ☐ No
Description of evidence (Documents, emails, photos, witnesses) Provide name if witnesses and contact details	

Section 3 – Whistle Blower’s Declaration

I confirm that this report is made in good faith and to the best of my knowledge

Signature (if not anonymous)	
Date	

Please turn over for continuation →

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Section 4 – For Compliance / Admin Use

Case No	
Receive By	
Date Received	
Forwarded To	
Initial Review Decision	☐ Proceed to Investigation ☐ Close case Remarks: