



الشركة العميلة للطاقة (ش.م.ك.م.)
Action Energy Company (K.S.C.C)

**ACTION ENERGY COMPANY
WHISTLEBLOWER'S POLICY - FINAL
ISSUE DATE: OCTOBER 2024**

Revision History

Version	Date	Meeting Resolution No.	Status	Summary of Changes
1	10/02/2025	2-2025	Approved	V1
2				
3				

Review & Approval List

Item	Name	Designation	Date	Signature
Prepared By	Protiviti Global	Consultant	27/10/2024	
Reviewed By	Asser Mahmoud	Compliance Manager	20/11/2024	
Reviewed By	Vikas Arora	Board Member	02/12/2024	
Reviewed By	Ahmed Al-Ajlan	CEO & Board Member	09/02/2025	
Approved By	BOD	BOD	10/02/2025	Resolution 02-2025

This Manual and its contents are strictly for internal use of Action Energy Company KSCC (“the Company”) and are as such treated as confidential material. No part of this manual may be reproduced, stored in any system or form, or transmitted in any form by any means – electronic, mechanical, photocopied, recorded, or otherwise without the prior written consent of the relevant authority in the Company. Violation of the above clause subjects an individual or an entity to applicable legal proceedings as per the laws of the State of Kuwait.

Table of Contents

Key Definitions	3
Introduction	5
1.1. Preface	5
1.2. Purpose & Objective:	5
1.3. Scope of Application of Policy	6
1.4. Policy Custody and Distribution	6
1.5. Policy Maintenance	6
1.6. Policy Maintenance Authorities	6
1.7. Precedence of Laws and Regulations	7
2. Whistleblower's Policy Statements:	8
2.1. General Rights:	8
2.3. Key Responsibilities	10
2.4. Whistleblower Performance Measures	11
3. Procedure for Handling Whistleblowing Complaints	12
3.1. Process Overview	12
3.2. Detailed Procedure for Handling Whistleblower Complaints	12
4. Malicious Whistleblowing	15
Appendix	15

Key Definitions

1. **The Company:** refers to Action Energy Company K.S.C.C.
2. **The Authority (CMA):** refers to the Capital Markets Authority in Kuwait.
3. **Board of Directors ('Board'):** refers to the governing council of the company as required under the Kuwait Companies Law No.1 for 2016 and its Executive Bylaws as maybe amended from time to time.
4. **Chief Executive Officer ('CEO'):** refers to a person appointed by the company's Board of Directors from amongst the Members of the Board (except the Board Chairman) or others, who shall be directly under the Board of Directors, who is in charge of managing all Executive works relating to the Company's main activities, in accordance with the responsibilities and authorities granted to him.
5. **Executive Management:** refers to the C-suite Executive positions directly subordinate/ reporting to the CEO in accordance with the organizational structure adopted by the company. The Executive Management are appointed by the Board and are responsible for day-to-day business of the entity.
6. **Employee/ Employees:** refers to the employee/s of the company, including member/s of the Executive Management, part time employee/s, seconded employee/s etc.
7. **Shareholders:** refers to an individual or legal entity (such as another corporation, a body politic, a trust or partnership) that is registered by the company as the legal owner of shares of the share capital of a public or private company.
8. **Stakeholders:** refers to every person of interest to the company such as employees, creditors, suppliers, clients, agents, and service providers thereto.
9. **Material Information:** refers to any information concerning a Listed Company, Listed Fund, Issuer or Obligor, as the case may be, relating to its activity, a person, its financial position or its Management which is not available to the public and which relates to its assets, liabilities, financial position or general course of business, which may lead to a change in the price or volume of trading in a relevant Listed Security, or affect the willingness or unwillingness to acquire or divest an interest in such a Security, or may affect the Issuer's ability to meet its obligations.
10. **Disclosure:** refers to the process of disclosing information (financial and non-financial), which would affect an entity, its dealings and customers, and is carried out either periodically (specific periods), or immediately when the information occurs or becomes available, so that the information is available at the same time to everyone, and it is not possible for one person to benefit before others from the information, in line with the requirements and regulations of the Capital Markets Authority.
11. **Corporate Disclosure:** refers to the communication of information by people inside the public/ listed entity towards people outside.
12. **Financial Information:** refer to the annual financial statements of the entity prepared in accordance with the applicable accounting and auditing standards as well as the first, second, and third interim financial statements of the entity.
13. **Non-Financial Information:** refers to any type of information about a company or organization that is not financial in nature. This can include information about the company's social and environmental impact, its corporate governance practices, and its human capital.

14. Board of Directors Report (or 'Chairman's Report'): refers to the report given by the Board Chairman at the annual general meeting on behalf of the Board that provides accountability on the activities of the past year and that may reflect on what is anticipated in the next year.

1. Introduction

1.1. Preface

This Whistleblower Policy (Policy) including applicable procedures is established to enable Stakeholders to report suspected or actual wrongdoing within the Company. The Company believes that a culture of transparency and accountability is essential to its success, and that Policy will play a vital role in protecting the Company from fraud, corruption, and other forms of misconduct. The Policy provides a framework for Whistleblowers to report concerns safely and confidentially. It also prohibits the Company from retaliating against Employees/ informants who make reports in Good Faith.

1.2. Purpose & Objective:

The purpose of the Policy is to encourage Employees and other Stakeholders to report suspected wrongdoing or misconduct without fear of retaliation.

The aims of the Policy include the following:

- a) To comply with laws and regulations.
- b) To promote ethical behaviour and responsibility within the organisation.
- c) To protect the public interest and help uncover fraudulent, illegal, or unethical activities that may be harming the public or the organisation.
- d) To improve organisational performance by addressing misconduct and avoiding costly mistakes and reputational damage.

The objectives of the Policy are to:

- a) Provide a safe and confidential way for Employees and other Stakeholders to report suspected wrongdoing or misconduct.
- b) Ensure that all complaints are investigated fairly and impartially.
- c) Protect Whistleblowers from retaliation.
- d) Promote a culture of integrity and accountability within the organisation.

The Policy should be read in conjunction with the following regulations and internal policies of the Company:

Regulations:

- a) Capital Markets Authority Law (Law No. 7 of 2010).
- b) CMA Executive Bylaws as may be amended from time to time.

Company Policy

- a) Code of Ethics and Business Conduct.
- b) Conflict of Interest Policy.
- c) Related Parties Transactions Policy.
- d) Procurement Policy.

1.3. Scope of Application of Policy

The Policy applies to the Company's Directors, Executive Management, Employees, consultants, advisors, contractors, and other Stakeholders, as applicable. The policy does not apply to private grievances or to matters relating to employee discipline, recruitment, and selection. Any exception to the Policy shall be approved by the Board.

1.4. Policy Custody and Distribution

The contents of the Policy are confidential and for internal use only. The Compliance Department shall maintain the Policy. The Policy will be circulated to the Board Members, Executive Management and relevant Employees of the Company and/or published on the Company intranet for general access, as applicable. Any access to the Policy to interested third parties shall be provided subject to their signing a standard non-disclosure agreement with the Company and the approval of the Compliance Department.

1.5. Policy Maintenance

The Policy shall be reviewed periodically (at least once every three years) and more frequently if deemed necessary. Revision, if any, to the Policy shall be based on one or more or a combination of the following reasons:

- a) Changes in applicable laws, regulations, and internal policies of the Company.
- b) Gaps/ improvement opportunities identified by the Company's Internal Audit (IA) Department.
- c) Any other change which necessitates an amendment to this Policy.

All requests for revision to the Policy shall be submitted to the Compliance Department and shall follow the steps mentioned below:

1. In the event of any request for revision to the Policy, the Compliance Department shall review the request and assess if the proposed changes are pertinent and justified, considering any of the above-listed parameters.
2. If the proposed changes are not justifiable, the Compliance Department may reject such a request and notify the requester, accordingly, along with reasons for the rejection.
3. If requested changes are deemed to be justifiable, the Compliance Department shall escalate the change request to the Audit & Risk Management Committee for review and the Board for approval.
4. Subject to endorsement by the Audit & Risk Management Committee and approval by the Board, the Compliance Department shall amend/ update the Policy. The revised Policy shall be circulated to the Board Members, Executive Management, Department Heads, and Employees of the Company.

1.6. Policy Maintenance Authorities

Authorities	Maintain	Update/ Amend	Review	Endorse	Approve	Publish
Compliance Department	✓	✓	✓			
Human Resources &			✓			✓

Authorities	Maintain	Update/ Amend	Review	Endorse	Approve	Publish
Admin Department						
Audit & Risk Management Committee			✓	✓		
Board					✓	
IT Department						✓

1.7. Precedence of Laws and Regulations

In the event of a conflict between any statement and/or course of action in this document and applicable regulations, the relevant laws and regulations shall always take precedence.

2. Whistleblower's Policy Statements:

2.1. General Rights:

The Company has adopted the Policy to encourage openness and trust among its Stakeholders. The Policy is intended to encourage concerned individuals to report complaints confidentially and/or anonymously, and to ensure appropriate protection for the Whistleblower.

2.1.1. Valid Concerns:

a) The categories of valid Whistleblower complaints and disclosures shall include the following:

1. Fraud and corruption.
2. Financial irregularities.
3. Bribery and kickbacks.
4. Conflicts of Interest.
5. Misuse of authority/ abuse of power.
6. Misrepresentation or falsehood.
7. Discrimination and harassment.
8. Violations of laws and regulations.
9. Breach of the Company's Code of Conduct.
10. Breach of the Company's policies and procedures.
11. Breach of health, safety, and environmental rules.
12. Covering up any information relating to the above.
13. Changes in shareholdings and stock ownership, as and when applicable.

2.1.2. Confidentiality and Anonymity

The Company shall treat all Whistleblower complaints and reports received by it with complete confidentiality and shall maintain the anonymity of the complainant and affected parties to the extent reasonable and practicable under the circumstances.

The Company shall also maintain the confidentiality of any individual accused of wrongdoing and will ensure that the individual is afforded appropriate due process and protection from unwarranted personal and professional harm. The Company shall ensure that individuals who have been wrongly accused do not suffer damage to their reputation and/or to their livelihood.

Note: Whistleblowers may choose not to reveal their identity when reporting concerns or disclosing any breach, violation, or wrongdoing to the Company. The Company must ensure that the identity of all Whistleblowers is kept confidential to the fullest extent as reasonably practicable and within the legitimate needs of law and any ensuing evaluation or investigation unless the Whistleblower has authorised such disclosure in writing at a specified stage of the investigation or enquiry proceedings. Whistleblowers must also maintain the same level of confidentiality and refrain from reporting or disclosing any related information to any party or media before or after lodging the complaint or its resolution.

2.1.3. Whistleblower Protection

The Company shall take all reasonable steps to ensure that no individual shall suffer harassment, retribution, or adverse employment consequences regardless of whether his/her identity is disclosed or not, and who in Good Faith filed a complaint, concern or reported any wrongdoing, or a violation or suspected violation of laws, regulations, or policies.

The Company shall not retaliate or attempt to retaliate. It will not tolerate any retaliation or attempted retaliation by any other person or group, directly or indirectly, against anyone who, in Good Faith, makes a complaint or aids in the investigation or resolution of the complaint.

2.1.4. Requirements for Reporting Complaints

All Whistleblowers shall comply with the following key requirements when reporting complaints:

- a) Notification of any suspicious activity or violation of applicable laws and/or policies must be made in Good Faith and not with any intent of causing disruptions, confusion, or rumours or for any personal gain or in a way that is likely to damage the reputation of the Company or its Employees.
- b) Exercise fair judgment to ensure credibility of concern(s).
- c) Provide all relevant information, including:
 1. Background and history of the concern (giving relevant dates).
 2. Reasons for the particular concern - about the situation/ person/ action/ omission, etc.
 3. Supporting evidence, where available and/or to the extent possible.

Note: The Whistleblower is not required to provide proof of the concern but is required to state their reasons for that concern. The Whistleblower should follow the guidelines outlined below while making their report:

- a) Be specific and factual.
- b) Avoid making assumptions or inferences.
- c) Be polite and professional.

2.2. Whistleblower Reporting Options

The Company has implemented a flexible mechanism for enabling the reporting of Whistleblower concerns and complaints:

- a) Provide the following email address for Whistleblower reporting: compliance@actionenergykw.com
- b) Provide a Whistleblower Form on its website for Whistleblowers to fill out and submit. Please refer to the Appendix for the Whistleblower Form.
- c) Allowing direct disclosure or complaint to any Company officer/ manager without consideration of any hierarchy or protocol.

Note: Whistleblowers should furnish a brief note covering the pertinent details about the matters that they wish to report on. This note should, inter alia, cover the following aspects to the extent possible:

- a) What wrongdoing is being reported?
- b) When did it occur (relevant dates and times)?
- c) Specific location of the wrongdoing.
- d) How did the individual or firm commit the activity or the alleged wrongdoing?
- e) Grounds for the informant to believe the activity is improper.
- f) What, if any, documentation exists to support the allegations?
- g) Identity of other witnesses (if any) to the alleged wrongdoing.

The Whistleblower should preferably attach to the note copies of the documents that may help in establishing the veracity of the complaint, taking care that the attached documents do not contain the name or any other particulars of the informant's identity.

When filling out the Whistleblower Form, the envelope should be marked "Confidential" in the "Addressee Name" field.

2.3. Key Responsibilities

2.3.1. Board

The Board is responsible for ensuring that effective Whistleblowing procedures are in place, guaranteeing confidentiality and anonymity and avoiding conflicts of interest. The Board shall approve, implement, monitor, and recommend actions arising from an investigation into Whistleblower complaints.

2.3.2. Internal Audit

The Internal Audit function is responsible for:

- a) Assuring the Board of the effectiveness of the Company's Whistleblowing system and procedures.
- b) Reviewing cases where Whistleblowers have been unfairly treated for raising concerns.
- c) Reviewing procedures for retaining evidence in relation to concerns.
- d) Review whether confidentiality issues have been managed effectively.
- e) Investigating specific cases referred to by the Board or the Executive Management.

2.3.3. Compliance Department

The Compliance Department shall be responsible for:

- a) Documenting received complaints and acknowledging to the Whistleblower receipt of complaints by the Company (in case the complainant's identity is disclosed/ known).
- b) Reporting Complaints received to the Audit & Risk Committee.
- c) Maintaining the status of all complaints with updated issue status.
- d) Conducting an initial evaluation of the reported complaint.
- e) Coordinating further investigations, if any, into the complaints received and overseeing the matter till its final resolution¹.
- f) Ensuring/ confirming that the Board and the Executive Management get accurate and up-to-date information on the volume and status of Whistleblowing cases.
- g) Administering the day-to-day compliance and implementation of this Policy as delegated by the Board.

¹ This will include, reviewing/ tracking actions taken in relation to concerns raised and ensuring that appropriate follow-up actions have been taken to investigate and, if necessary, resolve problems indicated by Whistleblowing.

2.3.4. Human Resource Department

The Human Resource & Admin Department shall create awareness among its employees through a communication plan regarding the Company's Whistleblower Policy and publish the Policy accordingly on the Company's Website and in the Employee Handbook.

2.3.5. IT Department

The IT Department shall be responsible for establishing Email IDs for receiving Whistleblowing complaints, ensuring that only designated personnel have access to these email IDs.

2.4. Whistleblower Performance Measures

The key Whistleblower complaint-handling performance measures shall include, but not be limited to, the following:

- a) Number of complaints received.
- b) Average number of complaints over a period (e.g., month/ quarter).
- c) Complaints by division, department, function, etc.
- d) Complaints by the nature of the report/ complaint.
- e) Number of investigations in process or completed.

The objective of establishing metrics and reporting on the resulting measures is to enable the Company to improve its controls and processes as appropriate.

3. Procedure for Handling Whistleblowing Complaints

3.1. Process Overview

3.1.1. Analysing and Investigating Reported Issues

The Company shall carefully analyse and investigate complaints by conducting all necessary procedures and taking all necessary actions to reach appropriate conclusions. Investigating complaints/reports shall be based on the following criteria, using discretion as needed:

- a) The seriousness of the issue/s raised.
- b) The credibility of the information or allegations in the disclosure.
- c) The prospects of an effective investigation and discovery of evidence.

3.1.2. Resolving the Complaints Effectively

The Company shall determine the appropriate resolution of complaints by identifying the required action or corrective action plan and implementing it accordingly.

3.1.3. Retaining Evidence

The Compliance Department should ensure that files related to Whistleblower complaints are logically organised and that evidence of conclusions is clearly indicated.

Note: The Compliance Department will retain and secure evidence related to Whistleblower complaints for key actions and decisions in a manner that protects the confidentiality of the Whistleblower and any other individuals involved in the complaint. Access to the evidence shall be restricted and limited to authorised personnel, such as investigators, HR professionals, and legal counsel.

3.1.4. Reporting to Board and Executive Management

The Compliance Department shall prepare and circulate a written final report to the Board, the Audit and Risk Management Committee, and the Chief Executive Officer upon completion of the investigations. The report should include the investigation's findings, the recommended corrective actions, and the estimated timelines for implementing them.

3.1.5. Retaining Records

The Company securely retains Whistleblowing-related records for a minimum of five years in accordance with its Archival Policy.

3.2. Detailed Procedure for Handling Whistleblower Complaints

3.2.1. Receive, Record and Screen the Complaint

Each Whistleblower complaint, whether oral or written, is logged when received. The Compliance Department utilises the Complaints Record-Journal (please refer to the Appendix for the Complaint Log template) to capture basic information in a standardised format as soon as it is received. The journal captures the following information/details:

- a) Complaint number: a unique complaint number for tracking and control purposes.
- b) Complaint Date: Date of complaint/ receipt of complaint.

- c) Details of Concern/ Complaint: basic complaint information/ details such as:
 1. Whistleblower/ source of complaint (i.e., internal, such as an Employee, vs external, such as a customer).
 2. Suspected party, group, or company.
- d) Whistleblower Contact Information: when a complaint is received from an outside source.
- e) Action Recommendation: recommendation of any of the following actions based on screening of complaint (by the Compliance Department/ or an internal committee, as appropriate):
 1. Dismissed (as irrelevant or unmerited).
 2. Referred to the Audit & Risk Committee (in case of significant/ specific/ fraud matters).
 3. Referred to another responsible party for investigation (such as HR for a personnel issue or Sales & Marketing for a client-related matter, etc.).
- f) Report Date: Investigation report issue date.
- g) Complaint Status: status of complaint and results of investigation, etc., as of [date].

Note: Any complaint received by the Company Director, Executive Management, or Employees from any source inside or outside the Company shall be forwarded immediately to the Compliance Department for review and necessary action.

3.2.2. Record the Complaint

The Compliance Department prepares the complaint report, which includes but is not limited to the following details:

- a) Type of concern (i.e., legal, accounting, ethical, other).
- b) Description of concern.
- c) Identification of parties, departments, and functions involved.
- d) Internal reporting hierarchy (e.g., relevant managers, supervisors, etc.).
- e) Identification of others who might know about the complaint.
- f) Whistleblower authorisation for disclosure (i.e., waiver of anonymity).
- g) Complaint status (which will change as the complaint moves through the handling process, e.g., Pending Action, No Action, Under Investigation, Withdrawn, Resolved, Dismissed).
- h) Comment sections that record the latest status updates as the complaint progresses through the process.

3.2.3. Analyse the Complaint

The Compliance Department shall inform and coordinate with the Audit & Risk Committee, Executive Management, and/or the Board, as appropriate, for the investigation of the complaint. The Audit & Risk Committee shall determine how each complaint will be managed or whether the appropriate investigation or action will be taken in respect of the complaint. The Audit & Risk Committee or the Board may form or appoint an independent investigation team/ committee and/or external advisor at the Company's expense to assist in conducting any investigation, as needed.

Note: The Company will use reasonable efforts to protect the confidentiality and anonymity of the Whistleblower and any involved witnesses during investigations, consistent with the need to conduct a thorough investigation

and applicable laws². The Company may notify any Employee, Director, Officer, or Employee named in a complaint to appear at a designated time during the investigation. The named person(s) will have the opportunity to respond to the complaint, and their response will be included in the report.

3.2.4. Investigate the Complaint

The investigating team, committee, or external advisor (the Compliance Department may coordinate any investigations conducted by external experts) will conduct an in-depth analysis and report its findings directly to the Compliance Officer, the Board, and the Audit and Risk Committee, as appropriate.

The possible outcomes of the investigations may include:

- a) The allegation could not be substantiated.
- b) The allegation is substantiated with the following recommendations:
 1. Disciplinary action to resolve the issue.
 2. Legal action or reporting to the relevant authorities for issues indicating a criminal offence.
 3. A corrective action plan is to be taken to address the recurrence of the issue.
 4. Recommendations on extending/ expanding the investigation, if necessary, or beyond the scope of the current investigation.

3.2.5. Resolve the Complaint

The Audit & Risk Committee or the Board of Directors, as appropriate, will review the investigation report and the recommendations made by the investigation team, committee, or external advisor. The resolution of complaints will be based on the preparation and implementation of an appropriate corrective action plan.³ The Compliance Department will coordinate with the Audit & Risk Committee to develop, implement, and monitor the effectiveness of corrective action plans.

3.2.6. Monitor the Status of the Complaints

The Compliance Department will maintain a record and updated status report of all valid complaints received, including the results of investigations and follow-up on complaints under investigation, to ensure timely completion. Please see the Compliance Department Report Form in the Appendix.

3.2.7. Follow-up on Corrective Action Plans

The Compliance Department shall monitor and follow up on the implementation of corrective action plans until the matter is closed, and obtain the Board's approval for any material changes to the corrective action plan. The Compliance Department shall also provide the Board with regular updates on the progress of corrective action plans.

² The Whistleblowers and witnesses may testify using communication technology, video and other means and applications that secure confidentiality without undermining their reliability.

³ A corrective action plan is a set of anticipated procedures to be performed and actions to be followed to address and resolve a Whistleblower complaint. For example, the plan may call for the strengthening of an internal control, the roll-out of a Company-wide communication program etc. The corrective action plan shall be formally approved and adopted by the Board.

4. Malicious Whistleblowing

Any frivolous, malicious, or false allegations will be considered a serious disciplinary offence, and the Company may take appropriate disciplinary, civil, or legal action against the complainant based on the outcome of its investigation.

Note: The Company recognises that it may not always be possible to determine whether a complaint is warranted. Therefore, the Company will take care to avoid discouraging complainants from reporting information, even if there is some uncertainty about whether an allegation can be proven.

APPENDIX

Whistleblower Report Form

[Confidential-Please read instruction footnotes]**

Please provide the following details for any suspected serious misconduct or any breach or suspected breach of law or regulation that may adversely impact the Company and submit directly to any of the investigation Committees' members. Please note that you may be called upon to assist in the investigation, if required.

Note: Please follow the guidelines as laid out in the Whistleblowing Policy and Procedures

REPORTER'S CONTACT INFORMATION	
<i>(This section may be left blank if the reporter wants to be anonymous)</i>	
NAME / EMPLOYEE NO.	
DESIGNATION	
DEPARTMENT	
CONTACT NUMBERS	
E-MAIL ADDRESS	
SUSPECT'S INFORMATION	
NAME / EMPLOYEE NO.	
DESIGNATION	
DEPARTMENT	
CONTACT NUMBERS	
E-MAIL ADDRESS	
WITNESS INFORMATION <i>(If any)</i>	
NAME	
DESIGNATION	
DEPARTMENT	
CONTACT NUMBER/S	

E-MAIL ADDRESS	
COMPLAINT: Briefly describe the misconduct / improper activity and how you know about it.	
Specify what, who, when, where and how. If there is more than one allegation, number each allegation and use as many pages as necessary.	
1. What misconduct / improper activity occurred?	
2. Who committed the misconduct / improper activity?	
3. When did it happen, and when did you notice it?	
4. Where did it happen?	
5. Is there any evidence that you could provide us? ##	
6. Are there any other parties involved other than the suspect stated above?	
7. Do you have any other details or information which would assist us in the investigation?	
8. Any other comments?	
Date:	Signature (Optional):

Instructions

1. We are committed to the highest possible standards of openness, probity and accountability. In line with that commitment, we expect employees who have concerns about suspected misconduct or malpractice within the company to come forward and voice them.
2. If you wish to make a written report, please use this report form. Once completed, this report becomes confidential. It is recognised that, in most cases, the person raising concerns will wish to be dealt with confidentially. All reasonable efforts will therefore be made to avoid revealing the person's identity.
3. We encourage you to provide your name with this report. Concerns expressed anonymously are much less powerful, but they will be considered as far as practicable.
4. ##: You should not attempt to obtain evidence for which you do not have a right of access since whistleblowers are 'reporting parties' and not 'investigators'.

.....

For Investigation Committee Use

Report No.

Received By:	Received On:
Acknowledgement Sent On:	
Investigation Required (Yes / No)? <i>(If no, please state the reason.)</i>	
Investigation Done By:	
Investigation Result briefs:	
Action Taken / Conclusion:	
Reported to the Investigation Committee Chairman on:	
Signed Off by:	

Register of Concerns and status

Concerning Ref. No.	Date Of receipt	Whistleblower/ Staff raising the concern	Concern Details	Investigation Report Issue Date	Status and results of investigation as on.....[date]

Complaint No.:	Complaint Description:	
Date of Report of Complaint:		
Complaint Received By:	Date Received:	Acknowledgement Details:
	Date of Acknowledgement:	
Recommendation on Required Action:	Details:	
Complaint Investigation Status:	Details of the Complaint Investigating Team:	
	Details of Results of Complaints Investigation:	
	Date of Issue of Investigation Report:	
Complaint Status:		
Complaint Resolution Status:		
Date of Report Board	Board Comments	

Follow-up Actions (if any):	
Date:	Signature