



ADVANCE SYNERGY REALTY SDN BHD

A WHOLLY-OWNED SUBSIDIARY OF ADVANCE SYNERGY BHD.

(57798-H)

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WHISTLEBLOWING FORM

NAME	
NRIC NO.	
EMPLOYEE NO.	
COMPANY	
DEPARTMENT	
CONTACT DETAILS Telephone: Handphone: Email:	
Name of alleged wrongdoer/employee committing wrongdoing/ misconduct	
Department of alleged wrongdoer/employee	
Date of the incident Time of the incident (if any)	
Place of the incident	
Reason for concern	
Witness (if any)	
Additional remarks	

Declaration:

I have read and understood the Whistleblowing Policy and Procedures. I affirm that all information submitted in this Form is true and accurate to the best of my knowledge and agree to extend my full cooperation to the Company in their investigation of my report/complaint.

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Name:

Date: