Group Whistleblowing Disclosure Form

1.	**PERSON(S) INVOLVED IN CONCERN RAISED**	
a.	Name of Person(s) Involved	
b.	Designation	
c.	Company (Please indicate if Baiduri Bank Sendirian Berhad, Baiduri Finance Berhad or Baiduri Capital Sendirian Berhad)	
d.	Department / Division / Branch	
2.	**DETAILS OF INCIDENT**	
a.	Date / Time / Location of Incident	
b.	Nature of Incident	
c.	Description of Incident	
3.	**SUPPORTING INFORMATION**	
a.	Supporting Evidence and/or Documents (Please attach, if any)	
b.	Witness(es) to the Incident (Please provide details, if any)	
4.	**PARTICULARS OF WHISTLEBLOWER**	
a.	Name	
b.	Contact No	
c.	E-mail Address	
d.	Relationship with Baiduri Bank Group	