

WHISTLE BLOWER REPORT FORM

Please provide the following details for any suspected serious misconduct or any breach or suspected breach of law or regulation that may adversely impact company and kindly submit the form directly to the designation officers via mail / email: whistleblow@namhwaopera.com. Please note that you may be called upon to assist in the investigation, if required.

WHISTLE-BLOWER'S / REPORTER'S INFORMATION

ALLEGED / SUSPECT'S INFORMATION

Name: _____

Designation: _____

Department: _____

Contact Numbers: _____

E-Mail Address: _____

Address: _____

Name: _____

Designation: _____

Department: _____

Contact Numbers: _____

E-Mail Address: _____

Address: _____

Can you be contacted if more information is required? Yes / No

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 is/are the misconduct? When did it happen? When did you notice it? Where did it happen?



2. Have you approached the person committed to misconduct? If yes, what was his/her response?

3. Is there any evidence that you could provide us?* Or any other details or information which would assist us in the investigation?

4. Are there any other parties involved other than the suspect stated above?

5. Have you reported the incident internally or through any other channels? If yes, to whom have you made the report?

Signature: _____

Date: _____

Note: * - 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'.

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