

## **CONFLICT OF INTEREST DISCLOSURE STATEMENT**

I hereby d	eclare a real/potential Confl	ict of Interest as foll	ows:				
Outside employment and action outside the Group		es 4. 🗆 Board Mem	nbership				
2. □ Famil relati	y members or Close person onships tment activities	<ul><li>5. □ Dealings with suppliers, customers, etc.</li><li>6. □ Others</li></ul>					
Please stat	e details:						
Proposed actions to resolve/ manage the conflict							
(Sig	gnature)		(Date)				
Name Company Division	:	Designation Job Grade	: :				

## Note:

This form is to be completed by any Group employee who has a conflict of interest.

If the Conflict of Interest lies within areas 1 and 2, please submit this form for approval to the Head of Human Resources.

If the Conflict of Interest lies within area 3, please submit this form for approval to the Head of Group Strategy and Business Development.

If the Conflict of Interest lies within area 4, please submit this form for approval the Head of Company Secretary.

If the Conflict of Interest lies within area 5, please submit this form for approval to the Head of Procurement.

It is the responsibility of the employee to keep a copy of the approved form for audit purposes. Employees must also provide a copy to the corresponding Head of Department for reference purposes.

## **APPROVAL BY HEAD OF DEPARTMENT**

		ct of interest disc to this matter:	losure (and plar	n) an	d have taken the
		-			
(Signature)					(Date)
Name	:		Designation	:	
Department	:		Company	:	
Division	•		1 /		