

## ANNEX 1: TEMPLATE OF THE IRREGULARITY REPORT

|   |   |
|---|---|
| Reported on   |   |
| <b>PERSONAL DATE OF THE REPORTING PARTY</b>   |   |
| Full name   |   |
| Contact details (phone number, address for correspondence, e-mail address)  |   |
| Please keep my personal data confidential   | YES / NO  |
| <b>DESCRIPTION OF THE IRREGULARITIES</b>  |   |
| Date and location of the incident   |   |
| Description of the irregularities   |   |
| Description of the actual and potential consequences of the irregularity  |   |
| Supporting evidence e.g. documents, witnesses, etc.<br><br>(please send the documents together with the application to the address shown) |   |
| Actions taken to eliminate irregularities or their consequences (if any)  |   |
| <b>TYPE OF THE IRREGULARITIES</b>   |   |
| YES / NO  | Corruption;   |
| YES / NO  | Public contracts;                                       |
| YES / NO  | Financial services, products and markets;               |
| YES / NO  | Counteracting money laundering and terrorist financing; |
| YES / NO  | Product safety and compliance;                          |
| YES / NO  | Transport safety;                                       |
| YES / NO  | Environmental protection                                |
| YES / NO  | Radiological protection and nuclear safety;             |
| YES / NO  | Food and feed safety;                                   |
| YES / NO  | Animal health and welfare;                              |
| YES / NO  | Public health;  |

|   |  |
|---|--|
| YES / NO  | Consumer protection  |
| YES / NO  | Privacy and protection of personal data  |
| YES / NO  | Security of networks and ICT systems   |
| YES / NO  | Financial interests of the State Treasury of the Republic of Poland, local government units, and the European Union  |
| YES / NO  | The European Union's internal market, including public law competition and state aid rules and corporate taxation;   |
| YES / NO  | Constitutional freedoms and rights of man and citizen - arising in relations between individuals and public authorities and not related to the areas mentioned in points 1-16. |
| <b>DETAILS OF THE PERSON / PERSONS WHO COMMITTED THE IRREGULARITY</b> |  |
| Full name<br>Other known information                                  |  |

**Statement by the person submitting the report:**

I declare that by making this report:

- I am acting in good faith;
- I have a reasonable belief that the disclosed information and allegations are true;
- I am not making this disclosure for personal gain;
- the disclosed information is accurate to the best of my knowledge, and I have disclosed all facts and circumstances known to me regarding the subject of the report;
- I have read the Procedure for making internal reports and taking follow-up actions at SoftKraft Sp. z o.o.
- I have read the GDPR Policy, available at <https://www.softkraft.co/pl/privacy/>

.....  
Whistleblower / reporting party (date and legible signature)

Signature of the person receiving the report

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Whistleblowing Reporting Officer (date and legible signature)