

*FTAL Whistleblower Disclosure Form*

**Whistleblower's Contact Information –Optional**

This section is optional depending on whether the Whistleblower chooses anonymous disclosure. However, the whistleblower is encouraged to fill in the preferred method of contact in order for Franklin Templeton to be able to provide updates on the disclosure.

<b>Whistleblower's Information</b>	
<b>Name</b>	
<b>Designation</b>	
<b>Supervisor</b>	
<b>Department</b>	
<b>Email Address</b>	
<b>Contact Number</b>	
<b>Address</b>	

I authorise for the information provided to be used to investigate possible wrongdoings

I would like to be updated on the progress of the report

<b>Preferred Method of Contact (e.g. Phone, Email, etc)</b>	
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<b>Witness's Information (if any)</b>	
<b>Name</b>	
<b>Designation</b>	
<b>Supervisor</b>	
<b>Department</b>	
<b>Email Address</b>	
<b>Contact Number</b>	
<b>Address</b>	

\*Note: Please attach appendix if there is more than one witness.

**Reporting of Alleged Misconduct**

Kindly provide as much information as possible about the wrong-doer and the alleged misconduct or any relevant information, as this will assist with the investigation.

**Subject's contact information and wrongdoing information – Required**

\*Note: Please attach appendix if there is more than one alleged wrongdoer.

<b>Wrong-doer's Information</b>	
<b>Name</b>	
<b>Designation</b>	
<b>Supervisor</b>	
<b>Department</b>	
<b>Office Location</b>	
<b>Email Address</b>	
<b>Contact Number</b>	
<b>Address</b>	

<b>Nature of Disclosable Matter</b>	
<b>What occurred</b>	
<b>How did the Alleged Wrongdoing occur</b>	
<b>When did the Alleged Wrongdoing occur</b>	
<b>Detailed description of alleged wrongdoing</b>	
<b>Any Evidence to support the information provided</b>	
<b>Any other details to assist in the investigation</b>	
<b>Any other Comments</b>	

<b>Signature of Whistleblower:</b>	<b>Date of Report:</b>

*FTIAL Whistleblower Investigation Form*  
(to be completed by Whistleblower Officers)

**A. Whistleblower Form Review**

<b>Details of Recipient</b>	
<b>Review Date</b>	
<b>Date Communicated to Whistleblower Investigation Officer</b>	

**1. Investigation of the Alleged Wrongdoing**

<b>Findings of Preliminary Investigation</b>

<b>Timeframe and Resources Required for Further Investigation</b>

<b>Interview with Whistleblower (if applicable)</b>

<b>Interview with any Witnesses (if applicable)</b>

**Interview with Alleged Wrongdoer (if applicable)**

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**Interview with Business Unit Manager and Other Relevant Business Units**

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**Documentary Evidence of the Alleged Misconduct**

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**Complete Findings of Investigation  
(Including procedure and outcome of the investigations, and any action taken)**

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**Systemic Issues or Trends Identified (if any)**

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<b>Date Investigation was Concluded</b>	
<b>Date Communicated to Whistleblower (if applicable)</b>	
<b>Date Register was Updated</b>	

Signature of Eligible Recipient:

Signature of Whistleblower Investigation Officer: