Nishikawa Rubber Group Compliance Whistleblowing/Consultation Form

Date of report	/ / (dd/mm/	yy)	
Reported by	□ Name [☐ Anonymity requested If you wish to remain anonymous, please note to our investigations/corrective action will be limited as we will be unable to verify facts by asking you submit materials/evidence.	d,
Affiliations	□ Company []	
	□ Department []	
	☐ Other relationships with NRC or its	affiliates	
]	
Description of the case	*Please provide as many details as possible and describe the case of legal/corporate ethics violation (who did what to whom, when, where, how, etc.).		
	When:		
	Where:		
	Name of perpetrator and his/her compa	ny and department:	
	Details, mode, frequency, etc. of the ac	tual violation:	
	Evidence of violation: Attached	□ Not attached	
How can we contact you?	□ Phone ()	□ E-mail(
	☐ Mail (Address:)	□ Other contact ()	
	Request for communication ()	
Results of			
response			
to the violation			
described			
above, policy			
on future			
responses			
* For use by the			
Compliance Office			

Name of the person reporting the case and other information given in this report will remain confidential, except when it is necessary to disclose such information for investigations of and responses to the case reported. The person reporting the case will suffer no disadvantage whatsoever on account of this report.