

Appendix No. 1

INTERNAL REPORT FORM

General information		
Who/what the Report concerns:		
Date:		
Place:		
Contact details of the Reporting Person		
Type of Report:	[] Anonymous	
First and last name:		
Phone number:		
Contact address:		
Det	ails	
Date of the Breach:		
Date of learning about the Breach:		
Place of the Breach:		
Has the Breach been reported?		
To whom?		
Description of the Breach		



Witnesses	
First and last name:	
First and last name:	
First and last name:	
Description of evidence	
Nature of	the Breach
Representations	
Trapicochiations	
I represent that I am aware of the potential conseq	uences of filing a false Breach Report.
I represent that I am filing this Report in good faith	



Appendices	
1.	
2.	
3.	
4.	

INSTRUCTIONS

If, in the course of the Investigation, it is determined that the Reporting Person consciously provided false information or concealed the truth in the Breach Report, the Reporting Person who is an Employee may suffer disciplinary liability in accordance with the Polish Labor Code. This may also be classified as a gross violation of fundamental employee duties and, as such, result in termination of the employment contract without observing the notice period, a fine, community work, or imprisonment of up to two years.

In the case of a Reporting Person who provides services or goods to Andea under a civil law agreement, determining that a false Breach Report has been filed may result in termination of the agreement and definite termination of cooperation between the parties, a fine, community work, or imprisonment of up to two years.

Irrespective of the consequences specified above, a Reporting Person who knowingly files a false Breach Report may be held liable for damages if a loss occurs in connection with the false Report.

Signature of the Reporting Person