

DECLARATION FORM TO COMPLIANCE OFFICER OF GIFTS AND OR HOSPITALITY GIVEN BY EMPLOYEE TO BUSINESS ASSOCIATES AND/OR THIRD PARTY

Employee's Name	
Designation	
Department	
Date	
Details of the gifts	Description of the gift:
	Estimated or actual value: (not exceed RM 1,000)
Date of the gifts will be offered	
Location on where the gifts will be offered	
Details of the third party receiving the gifts	
 Name of the institution/company 	
Name of the personnel who receiving the gifts	
Purpose of the occasion – for example in conjunction of annual festival	
Is there any potential conflict of interest on the Employee and or the Company?	
Approve to offer the Gifts and or hospitality or decline	Approve / Decline

APPENDIX 1(a)

evaluation, there is no potential conflict of interest on me or possible adverse impact to the Compan
Signature of the Employee:-
Approved by the Compliance Officer:-
Acknowledged by:
Head of Department

I hereby disclosed the information herein with good faith and based on my best knowledge and