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REPORTER'S DATA			

**MODEL A (Personal data)
FOR REPORTING UNLAWFUL CONDUCT
(c.d. whistleblower)**

In order to take advantage of the guarantee of confidentiality and in view of the confidential recording of the communication, it is necessary that the report is inserted in two closed envelopes:

- the first (envelope A) with the reporting person's identification data;
- the second (envelope B) with the report, in order to separate the reporting person's identification data from the report.

Both must then be placed in a third sealed envelope addressed to:

NOVAMEDISAN ITALIA SRL
“RISERVATA AL GESTORE DELLE SEGNALAZIONI” // “RESERVED FOR THE REPORTING MANAGER”

Via dei Lapidari, 3 – 40129 Bologna (BO)

Before sending a report, we invite you to read the privacy information on the page from which you download this form.

Receipt of the report will be acknowledged **within 7 days**

TO THE REPORTING MANAGER

NAME AND SURNAME OF THE REPORTER	
PHONE N./MOBILE N.	
E-mail	
ADDRESS	
PLACE AND DATE	
SIGNATURE	

PLEASE INSERT THIS PART OF THE FORM INTO A CLOSED ENVELOPE, SEPARATE FROM THE REMAINING, TAKING CARE NOT TO INSERT YOUR PERSONAL DATA IN OTHER PARTS OF THE DOCUMENT