

### Complainant Information (Optional)

Name

Position

Phone number

Email address

### Incident Details

Incident Date

Incident Location

**Incident Description** *(Please describe in detail the incident related to your complaint or report)*

**Related Persons or Involved Parties**

**Actions Already Taken (if any)**



6 Chimaras Str.  
151 25 Marousi, Athens



Tel. +30 213 0424310



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Registration Number:  
13498671000

### Violation Category (mark if applicable)

☐ Bribery

☐ Fraud

☐ Conflict of Interest

☐ Violation of Company Policy

☐ Other (please specify):

**Desired Response or Action (if any)**

**Confidentiality and Anonymity:** All reports will be handled confidentially. If you wish, you can remain anonymous, but providing sufficient details may help in better investigating the incident.

**Signature (optional)**

**Date**

<sup>1</sup>The company is committed to investigating all complaints within [e.g., 10 working days], in accordance with its complaint management policy. If necessary, the investigation will be conducted with absolute confidentiality and will ensure the protection of the whistleblower.

<sup>2</sup>Complaints can be submitted anonymously, but providing sufficient information will aid in a faster and more accurate investigation.

<sup>3</sup>The company's external collaborators can also submit complaints according to the same process. Complaints submitted by collaborators will be handled with the same seriousness and confidentiality.

<sup>4</sup>All information included in the complaint will be managed in accordance with the company's personal data protection policy and the GDPR regulations.



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