

Whistleblowing Communication

As part of our commitment to integrity, transparency, and the fight against corruption, CMS implements its Whistleblower Policy and Procedure.

It aims to:

- Encourage everyone to report any suspicious or unethical behavior (corruption, fraud, conflict of interest, etc.),
- Guarantee the confidentiality and protection of good faith whistleblowers,
- Strengthen the culture of compliance within CMS.

Reports can be made confidentially via:

- Email: compliance@cms-supply.net
- Confidential telephone number: +222 36614353
- Whistleblower form (attached)

Guaranteed protection:

No disciplinary action or retaliation will be taken against anyone who makes a report in good faith, even if the facts are not confirmed by the investigation.

Documents to consult:

- Whistleblower Policy
- Ethics Policy
- Whistleblower Form

These documents are available:

- In hard copy from the QHSE supervisor
- In electronic form upon simple email request

Every employee is required to read and comply with CMS Whistleblower Policy

We rely on everyone's cooperation to make CMS an exemplary organization in terms of compliance and accountability.

Managing Director



Sidaty Bechir



WHISTLEBLOWING DECLARATION FORM

1. Information about the reporting person (optional if you wish to remain anonymous)

- Name:
- Position:
- Department:
- Telephone:
- Email:

2. Subject of the report

- Corruption or attempted corruption
- Conflict of interest
- Fraud or embezzlement
- Collusion with a supplier or customer
- Violation of laws/regulations
- Harassment or abuse of power
- Other:

3. Details of the report

- Date(s) of the incident:
- Location(s):
- Persons involved (name, position, etc.):
.....
.....

- Detailed description of the incident:

(Please provide a factual description of what happened, mentioning the circumstances, possible witnesses, and available documents or evidence.)

.....
.....
.....

4. Attachments (if applicable)

- Emails
- Contracts / Documents
- Testimonials
- Other:

5. Would you like to be informed of the progress of your report?

- Yes
- No

Reporter's commitment (if not anonymous)

I certify that the information provided is made in good faith, to the best of my knowledge, and without malicious intent.

- Signature:
- Date: