

WHISTLE BLOWING MECHANISM

As part of its ethics policy, and in line with the ISO 37001 requirements on anti-bribery management systems, Bank Al-Maghrib provides a structured framework to collect and process whistle blowings. This mechanism has been conceived in order to provide, for its employees, as well as to its external partners (particularly contractors, vendors, suppliers (or any of their employees), customers, delegates or bodies under the Bank's control), to raise concerns on any of the malpractices involving:

- Theft, fraud or embezzlement of the Bank's assets;
- Prejudice to competitiveness and integrity rules in procurement;
- Conflict of interests;
- Insider trading;
- Incorrect or misrepresentation of any financial statements and audit reports;
- Corruption;
- Influence peddling;
- Discrimination;
- Sexual harassment.

The whistle blower shall bring to early attention of the Head of the Compliance Function his/her Disclosure¹ through one of the following means:

- sealed confidential letter to: Bank Al-Maghrib, Head of the Compliance Function: BP no. 445,
 Rabat;
- e-mail: fonctionconformite@bkam.ma,
- phone: (+212) 537 81 81 21.

The Whistle blower can choose not to identify (him/her)self. However, the Bank recommends that the whistle blower reveals (his/her) identity to ensure an effective investigation on the case.

The Bank ensures complete confidentiality of the information processed (including the identities of the whistle blower and that of the persons involved). It also ensures protection of personal data, in accordance with the legal and regulatory provisions in force.

¹ By clicking on the underlined word "Disclosure", the reader can access to the Whistle blowing form online.

Whistleblowing Disclosure ²

To be completed by the whistle blower

Optional³

If you are an employee of the Bank
Name:
Staff number:
Function:
Entity (Unit/ Division / Department or Agency / Branch):
If you are external to the Bank
Name:
Entity:
Telephone number:
E-mail address:
1. Employee(s) concerned by the whistle blowing disclosure:
Name:
Function:
Entity (Unit/ Division / Department or Agency / Branch):

² By means of this form, Bank Al-Maghrib collects your personal data, with your consent, in order to process the incidents referred to in Article 2 of the Ethics alert Instruction. This Processing has been declared to the CNDP under number D-370/2016. You can contact the Secretariat of the Ethics Committee (Head of the Compliance Function) to exercise your rights of access, rectification and opposition by virtue of law 09-08.

³ Information concerning the name of the alert issuer, his / her staff number, function, unit (or organization), phone number and address are not mandatory.

2. Description of the malpractice	
Give full details of all alleged facts:	
Date of occurrence:	
Place of occurrence:	
Involved persons (if applicable):	
Witnesses (if applicable):	
□ I attach all documents proving the alleged facts	
☐ I have no document proving the alleged facts	
Date of the Whistle blow	ing

For further information, please contact:
The Head of the Compliance Function

- By e-mail: fonctionconfoormite@bkam.ma

- By phone: (+212) 537 81 81 21