

SA8000 Reports and Complaints Form

| SPACE RESERVED TO INTERESTED PARTY | | | | | |
|--|--|--|-----------------------------------|--------------------------------------|--|
| <input type="checkbox"/> REPORT/ COMPLAINT | <input type="checkbox"/> WORKER | <input type="checkbox"/> CUSTOMER | <input type="checkbox"/> SUPPLIER | <input type="checkbox"/> OTHER _____ | |
| THE INTERESTED PARTY IDENTIFICATION DATA | | | | | |
| <input type="checkbox"/> THE INTERESTED PARTY WISHES TO STAY ANONIMOUS | <input type="checkbox"/> THE INTERESTED PARTY IS AVAILABLE TO BE CONTACTED: | | | | |
| | Name and Surname: | | | | |
| | Company: | | | | |
| | Address: | | | | |
| | Mail: | | | | |
| | Phone Number: | | | | |
| REPORTING AREA | | | | | |
| <input type="checkbox"/> CHILD LABOR | <input type="checkbox"/> FREEDOM OF ASSOCIATION AND RIGHT TO COLLECTIVE BARGAINING | <input type="checkbox"/> WORKING TIME | | | |
| <input type="checkbox"/> FORCED AND COMPULSORY LABOR | <input type="checkbox"/> DISCRIMINATION | <input type="checkbox"/> SALARY | | | |
| <input type="checkbox"/> HEALTH AND SAFETY | <input type="checkbox"/> DISCIPLINARY PROCEDURES | <input type="checkbox"/> MANAGEMENT SYSTEM | | | |
| REPORT DESCRIPTION / COMPLAINT OR SUGGESTION | | | | | |
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Date:

Signature

NOTES TO THE COMPILER

PROCEDURE FOR SUBMITTING THE REPORT/COMPLAINT AND/OR SUGGESTION

- Mail to bergonzimeccanicasrl@ticertifica.it
- Reporting box placed in the Human Resources Area