## Standard whistleblowing form to be submitted before the company Grupo Aldesa, S. A.

I. Whistleblower	
Victim of harassment:	
Other (please specify):	
II. Details of the victim of harassment	
Name:	
Surnames:	
DNI:	
Position:	
Type of contract/employment relationship:	
Type of contract/employment relationship.	
Telephone:	
-	
Email:	
Address for notification purposes:	
III. Details of the aggressor	
Full name:	
Group/professional category or position:	
Work centre:	
Company name:	
IV. Description of the facts	
Please describe the reported facts, using as many numbered pages as necess	sary and indicating the date of occurrence (whenever possible):
V. Witnesses and/or evidence	
If there are witnesses, please provide their full name:	
Please attach any means of evidence deemed necessary (indicating which):	
VI. Request	
	Y WHETHER IT IS SEXUAL HARASSMENT OR HARASSMENT ON THE GROUNDS dure foreseen in its applicable protocol:
OF SEX) against (IDENTITY OF AGGRESSOR) in order to commence the proce	dure foreseen in its applicable protocol:
Place and date:	Signature of the interested party:
To the attention of the Evenining Composition in charge of which	ablowing proceedings to fight sexual barassment and/or barassment

To the attention of the Examining Committee in charge of whistleblowing proceedings to fight sexual harassment and/or harassment on the grounds of sex at the company Grupo Aldesa, S. A.