**Report on irregularity**

**Information on the whistleblower**

|  |  |
| --- | --- |
| Name and surname |  |
| Selected method of communication (email, address, phone) |  |

**Data on the person(s) whom the report on irregularity concerns**

|  |  |
| --- | --- |
| Name and surname / identification data |  |
| Position /Function |  |

**Description of the irregularity being reported**

|  |
| --- |
| Detailed description of irregularity: |

**Statement on the accuracy and completeness of the information provided**

I hereby declare that at the time of filing this report on irregularity I have legitimate reason to believe that all reported information on irregularities as well as the documentation I submit is true.

I declare that I have not misused the report on irregularity, i.e. that I have not provided information that I know to be untrue, that I do not seek illegal gain under the request for action regarding the report on irregularity and that I have not and will not take other actions with the sole aim of harming STSI-INTEGRIRANI TEHNIČKI SERVISI d.o.o.

This statement on the accuracy and completeness of the information provided also applies to all additional information and documentation that I will submit to STSI-INTEGRIRANI TEHNIČKI SERVISI d.o.o. during the irregularity reporting process.

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 (Date) (signature)