

**DECLARATION OF INTEREST BY EMPLOYEES**

Hi,

As part of our Good Corporate Governance, it is important that all Employees of **Epsidon Technology Holdings ("ETH")** and its affiliations complete and sign the following Declaration of Interest.

It is important for all Employees to understand their employment duties towards ETH which entails, *inter alia*, commitment of their business time to furthering the business and commercial interests of ETH.

Moonlighting and/or external employment and/or external business interests are prohibited in terms of ETH employee policy, unless Employee's receive written consent from the General Manager/Managing Director of their respective business unit before pursuing outside business interests.

It is therefore important that you complete, sign, and submit the following form.

Please submit the completed form to your direct line manager for onward submission to the HR department.

If you have any queries, you are more than welcome to submit the same to the writer herein.

Yours faithfully,



Group HR

Michelle Hanekom

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## DECLARATION OF INTEREST BY EMPLOYEES' POLICY

### 1. PURPOSE

- 1.1. The purpose of this policy is to ensure that ETH (herein after referred to as the Employer) and its affiliations, employees disclose any personal, financial, or other interests that may conflict with their duties and responsibilities to the company including relationship with the Employer's Customers, Partners and Third-Party Service Providers.

### 2. SCOPE

- 2.1. This policy applies to all employees of The Employer, including full-time, part-time, temporary, and contract workers.

### 3. DECLARATION REQUIREMENT

- 3.1. All employees must disclose any interests that could potentially influence their decision-making or create conflicts of interest. These interests include, but are not limited to:

- 3.1.1. Financial Interests: Holding stocks, bonds, or other financial investments in a company that could be affected by the individual's decisions.
- 3.1.2. Outside Employment or Business Interests: Working for or having a financial stake in a competing organisation or engaging in a side business that could conflict with the individual's primary job responsibilities.
- 3.1.3. Family Relationships: Having a spouse, partner, or close family member who is employed by the same company or who has a financial interest in a business that interacts with the individual's employer.
- 3.1.4. Personal Relationships: Having personal relationships or friendships with clients, suppliers, partners or competitors that could influence decision-making.

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3.1.5. **Gifts, Favors, or Benefits:** Accepting gifts, favours, or other benefits from clients, suppliers, or other parties that could create a sense of obligation or bias in decision-making.

#### **4. PROCEDURE**

- 4.1. Employees are required to complete a Declaration of Interest form as and when requested and/or when deemed necessary by the Employer. Any changes in the employee's circumstances that may affect their declared interests must be promptly reported using the same form.
- 4.2. Managers are responsible for ensuring that their team members understand and comply with this policy.
- 4.3. The Human Resources department will maintain and monitor the Declaration of Interest records.

#### **5. CONFIDENTIALITY**

- 5.1. All information disclosed in the Declaration of Interest forms will be treated as confidential and will only be shared with individuals who have a legitimate need to know.

#### **6. COMPLIANCE**

- 6.1. Failure to disclose relevant interests may result in disciplinary action, up to and including termination of employment. Employees found to have conflicts of interest will be required to take appropriate steps to mitigate them, as determined by management.

#### **7. ACKNOWLEDGMENT**

- 7.1. By signing the Declaration of Interest form, employees acknowledge their understanding of this policy and their commitment to comply with its requirements.

#### **8. REVIEW AND UPDATES**

- 8.1. This policy will be reviewed periodically by the Human Resources department to ensure its effectiveness and relevance. Updates may be made as necessary to reflect changes in the company's operations or regulatory requirements.

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## 9. IMPLEMENTATION

9.1. This policy is effective immediately upon its adoption and applies to all employees from the date of implementation.

### DECLARATION OF INTEREST BY EMPLOYEES

1. Full Name:

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2. Identity Number:

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3. Name of the Insert Company Name ("Company") entity in which you hold a position:

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4. Position occupied in the Company:

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5. Do you have any relationship (family, friend, other) with persons involved in businesses that conflict with the business of the Insert Company Name:

**YES / NO**

Please circle appropriate answer

6. If yes, furnish particulars thereof in the below declaration:

I, \_\_\_\_\_, hereby declare the following interests in accordance with Insert Company Name 's policies on conflicts of interest:

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**7.1. Outside Employment or Business Activities:**

I am engaged in [describe outside employment or business activities, including any ownership interests, Employee, Director, Member, Agent, Shareholder, Trustee, Manager, Stakeholder]:

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**7.2. Financial Interests:**

I hold \_\_\_\_\_ [describe any significant financial interests, such as shares or other securities] in [name of company or entity]\_\_\_\_\_.

The total value of these financial interests is approximately [value] \_\_\_\_\_.

**7.3. Family Relationships:**

Do you have any relationship (family, friend, other) with persons involved in businesses that conflict with the business of the Insert Company Name:

**YES / NO**

Please circle appropriate answer

My spouse/partner/relative \_\_\_\_\_ is employed by or has a financial interest \_\_\_\_\_ [name of company or entity].

**7.4. Other Interests:**

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I understand that it is my responsibility to promptly update this declaration if there are any changes in my circumstances that may affect my declared interests.

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I acknowledge that failure to disclose relevant interests may result in disciplinary action, up to and including termination of employment.

I hereby certify that the information set out in this form and/or attached thereto is true and correct and acknowledges that failure to properly and truthfully complete this form may result in legal action being taken against me.

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**Signature**

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**Date**

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