



THE REPUBLIC OF BULGARIA PERSONAL DATA PROTECTION COMMISSION

Registration index and date
...../.....

(to be filled-in by the employee, handling the receipt and the registration of the breach)

WHISTLEBLOWING REPORT FORM

UNDER THE LAW ON THE PROTECTION OF PERSONS REPORTING OR PUBLICLY DISCLOSING INFORMATION ON BREACHES

NB! Before filling-in the form, please review the instructions on p.5 and 6

To be filled-in by the employee, receiving the report

UIN	Date
<input type="text"/>	<input type="text"/>

(Unique Identification Number – to be provided by the Central Authority)

TYPE OF REPORT

- IN WRITING ORALLY
- PERSONALLY THROUGH AUTHORIZED REPRESENTATIVE

INFORMATION ABOUT THE EMPLOYEE WHO HAS RECEIVED AND REGISTERED THE REPORT

Name
(first name, middle name and surname)

Title

Place of work
Name

BULSTAT /UIC

To be filled-in by the reporting person, if this form is being used as Whistleblowing report form

PART I. INFORMATION ABOUT THE REPORTING PERSON

Name
(first name, middle name and surname)

CONTACT DETAILS

Municipality

Place of living

Correspondence address

Telephone	E-mail address (if available)
<input type="text"/>	<input type="text"/>

- I would like to receive confirmation for the receipt of the report (to be filled-in only if the report is to be submitted to the CDPC)

IN HIS/HER CAPACITY
OF

- worker, employee, government official or other person who performs wage labour, regardless of the nature of the work, the method of payment and the source of financing;

<input type="checkbox"/>	person who works without an employment relationship and/or exercises a freelance profession and/or a craft;
<input type="checkbox"/>	volunteer or intern;
<input type="checkbox"/>	partner, shareholder, sole owner of the capital, member of managing or controlling authority of a commercial company, member of the audit committee of an undertaking;
<input type="checkbox"/>	person, working for a natural person or legal entity, its subcontractors or suppliers;
<input type="checkbox"/>	job applicant, who has taken part in a competition or other form of employment selection, and in this capacity has obtained information about a breach;
<input type="checkbox"/>	worker or employee in the cases when the information has been obtained as part of a labour or employment relationship, which has ended by the time of reporting the breach or the public disclosure;
<input type="checkbox"/>	other capacity of the whistleblower in the cases when the latter has obtained information about a breach in work-related context ¹ (please specify).....

PART II. AGAINST WHOM/WHICH AUTHORITY IS DIRECTED THE REPORT

IDENTIFICATION (IF THE REPORT IS AGAINST A NATURAL PERSON)	
NAME	<input type="text"/> (first name, middle name and surname, if known)
PLACE OF WORK NAME	<input type="text"/>
BULSTAT/UIC	<input type="text"/>
IDENTIFICATION (IF THE REPORT IS AGAINST STATE AND MUNICIPAL AUTHORITIES OR LEGAL ENTITIES)	
Name	<input type="text"/>
BULSTAT/UIC	<input type="text"/>

PART III. INFORMATION ABOUT THE BREACH

1. THE BREACH IS RELATED TO: (specify the relevant area)	
<input type="checkbox"/>	breach of the Bulgarian legislation or EU acts in the field of:
<input type="checkbox"/>	public procurement;
<input type="checkbox"/>	financial services, products and markets and prevention of money laundering and terrorism financing;
<input type="checkbox"/>	products safety and compliance;
<input type="checkbox"/>	transport safety;
<input type="checkbox"/>	environment protection;
<input type="checkbox"/>	radiation protection and nuclear safety;
<input type="checkbox"/>	food and feed safety; animal health and welfare;
<input type="checkbox"/>	public health;
<input type="checkbox"/>	consumers protection;
<input type="checkbox"/>	protection of privacy and personal data;
<input type="checkbox"/>	security of network and information systems;
<input type="checkbox"/>	breach affecting the financial interests of the EU as referred to in Article 325 of the Treaty on the Functioning of the European Union;
<input type="checkbox"/>	breach relating to the rules of the internal market, as referred to in Article 26(2) of the Treaty on the Functioning of the European Union, including breaches of EU and Bulgarian competition and state aid rules;
<input type="checkbox"/>	breach related to cross-border tax schemes, the purpose of which is to obtain tax advantage, that is contrary to the subject or purpose of applicable law in the field of corporate taxation;
<input type="checkbox"/>	committed crime of a general nature, in the cases where the reporting person has obtained such information in connection with the performance of his/her work or official duties.
<input type="checkbox"/>	breach of the Bulgarian legislation in the field of:
<input type="checkbox"/>	the rules for payment of due public state and municipal receivables;
<input type="checkbox"/>	labour legislation;
<input type="checkbox"/>	the legislation related to the performance of civil service.

¹ According to §1, p. 4 of the Additional Provisions of the LPPRPDIB - „Work-related context” means current or past work activities in the public or private sector through which, irrespective of the nature of those activities, persons acquire information on breaches and within which those persons could suffer retaliation if they reported such information.

2. WHEN DID THE BREACH OCCUR	
Date/Period	<input style="width: 80%;" type="text"/>
3. DESCRIPTION OF THE BREACH (specific details regarding the breach or the actual possibility for its occurrence)	
4. DESCRIPTION OF THE ATTACHED EVIDENCE	
PART IV. PERSONS (OTHER THAN THE REPORTING PERSON) TO WHOM PROTECTION SHOULD BE GRANTED <i>(if known by the time of reporting the breach)</i>	
<input type="checkbox"/>	persons who assist the whistleblower in the reporting process;
<input type="checkbox"/>	persons who are connected with the reporting person ² and who could suffer retaliation following the reporting;
<input type="checkbox"/>	legal entities that the reporting person owns, works for or is otherwise connected in a work-related context.
LISTING OF/IDENTIFICATION OF THE PERSONS WHO SHOULD BE GRANTED PROTECTION	
<p style="text-align: center;">CAPACITY OF THE PERSON <i>(colleague, relative (with no limitation in degrees), legal entities that the reporting person owns, works for or is otherwise connected in a work-related context)</i></p>	<input style="width: 100%; height: 20px;" type="text"/>
Name (for natural persons)	<input style="width: 100%; height: 20px;" type="text"/> <i>(first name, middle name and surname, if known)</i>
Name (for legal entities)	<input style="width: 100%; height: 20px;" type="text"/> BULSTAT/UIC <input style="width: 100%; height: 20px;" type="text"/> Represented by <input style="width: 100%; height: 20px;" type="text"/>
CONTACT DETAILS	
Place of living	<input style="width: 100%; height: 20px;" type="text"/>
Correspondence address	<input style="width: 100%; height: 20px;" type="text"/>
Telephone	<input style="width: 100%; height: 20px;" type="text"/>
E-mail address (if available)	<input style="width: 100%; height: 20px;" type="text"/>

² According to §1, p. 9 of the Additional Provisions of the LPPRPDIB - "Persons related to the reporting person" are third persons who could suffer retaliation in a work-related context, such as colleagues or relatives (without limitation in degrees)

PART V. PERSONS WHO CAN VERIFY THE REPORTED INFORMATION OR PROVIDE ADDITIONAL DETAILS

Name (for natural persons)	<input type="text"/> <small>(first name, middle name and surname, if known)</small>
Name (for legal entities)	<input type="text"/>
	BULSTAT/UIC <input type="text"/>
	Represented by <input type="text"/>
CONTACT DETAILS	
Place of living	<input type="text"/>
Correspondence address	<input type="text"/>
Telephone	<input type="text"/>
E-mail address (if available)	<input type="text"/>

THIS REPORT HAS BEEN SUBMITTED THROUGH INTERNAL CHANNEL:
(TO BE FILLED-IN, ONLY IF THE REPORT IS SUBMITTED TO THE CDPC)

YES NO

OFFER TO THE REPORTING PERSON TO SIGN THIS REPORT:
(to be filled-in by the employee who has received and registered the report)

CONSENT DENIAL

THE REPORT HAS BEEN RECEIVED AND REGISTERED BY:

.....
(name of the employee)

TITLE:

DATE:

SIGNATURE:

REPORTING PERSON/AUTHORIZED REPRESENTATIVE

.....
(name)

DATE:

SIGNATURE:

General information and instructions for filling-in the required information:

1. This report form is to be used for reporting breaches via internal and/or external channels:
 - „Internal reporting channel“ (before the obliged entities under Art. 12 of the LPPRPDIB³) is oral or written reporting of information regarding a breach which took place within an entity in the private or public sector.
 - „External reporting channel“ (before the CDPC) is oral or written reporting of information under the LPPRPDIB regarding breaches of the competent authorities.
2. When filling-in the report form (which has been submitted to the CDPC as external channel), it is mandatory to specify, if the breach has also been reported via an internal channel.
3. NB! The report form is to be used by the employees (designated by the obliged entities to receive and register such reports) when registering a breach. Reporting persons may also use this form to report a breach. In this case the latter should fill-in Parts I-V (including) only.
4. The report form may be used for reporting a breach orally. In these cases, the designated employee shall document the breach by filling-in the form. Once the form has been completed, the designated employee shall offer the reporting person to sign the form and shall mark the relevant field with his/her consent. The signature must be placed within 7 days as of such offer.
5. Reports shall be reviewed, when submitted by an individual, either personally, or through a representative, authorized with an explicit power of attorney in writing (no notary certification is required) via internal or external reporting channels, or in cases of publicly disclosed information for breaches in work-related context.
6. When submitting a report through an authorized representative, the power of attorney specified in p. 5 is to be attached in original.

For the employee, receiving and registering reports:

7. The receipt of Unique Identification Number (UIN) is mandatory when registering a report through an internal reporting channel. The UIN shall be generated via the CDPC website. To obtain the UIN, the employee, handling the receipt and registration of reports, has to choose the option “UIN Receipt” and provide the following information:
 - Name and BULSTAT/UIC of the employer, to whom the breach has been reported;
 - Identification details of the employee, handling the receipt and registration of reports;
 - Subject of the report (the respective breach area);
 - Type of report (orally or in writing).
8. The reporting person shall be provided with the UIN details and with the date of registration of the report within the legally prescribed term.
9. All submitted reports for breaches shall be registered. The circumstances under p. 10-12 of these instructions shall be assessed following the registration and the UIN receipt.
10. No proceedings shall be initiated regarding anonymous reports or reports related to breaches committed more than two years ago.
11. Reports for breaches which fall out of the scope of the LPPRPDIB and the contents of which shall not be deemed plausible, will not be reviewed.

³ Obligated entities

Art. 12. (*) (1) Obligated entities under this Act shall be as follows:

1. employers in the public sector, with the exception of the municipalities under Para. 2;
2. private sector employers with 50 or more workers or employees;
3. employers in the private sector, regardless of the number of workers or employees, if their activity falls within the scope of European Union acts, specified in Part I, Letter "B" and Part II of the Annex to Art. 3, Para. 1 and 3.

(2) Municipalities with a population of less than 10 000 people or fewer than 50 workers or employees may share resources for receiving and following up on signal reporting, subject to confidentiality obligations.

(3) Obligated entities under Para. 1, item 2 with a total number from 50 to 249 workers or employees may use a common channel for internal reporting, by designating one person or a separate unit, pursuant to Art. 14.

12. Registered reports which contain clearly false or misleading statements about facts shall be returned with instructions to the reporting person to correct the statements and with comment about his/her liability for libel under Art. 286 of the Penal Code.

For the reporting person:

13. The reporting person may use this document as a form for reporting breaches. In this case the reporting person shall fill-in Parts I-V (including) only.

14. The reporting person must be provided with information about the registration of the report, its UIN and date within the legally prescribed term. Any subsequent information or communication regarding the report shall be attached to this UIN.

15. Any new information or information which has not been initially provided may be submitted in addition by the reporting person. When submitting such information, the UIN related to the report shall be specified.

16. Please note that:

- For registered anonymous reports or reports of breaches committed more than two years ago, no proceedings shall be initiated.
- Reports for breaches which fall out of the scope of the LPPRPDIB and the contents of which shall not be deemed plausible, will not be reviewed.
- Registered reports that contain obviously false or misleading statements about facts shall be returned with instructions to the reporting person to correct the statements and with comment about his/her liability for libel under Art. 286 of the Penal Code.

FOR REPORTING BREACHES OR PUBLIC DISCLOSURE OF FALSE INFORMATION ADMINISTRATIVE-PECUNIARY LIABILITY UNDER ART. 45 OF THE LPPRPDIB SHALL BE BORN.