



SPONSORSHIP – APPROVAL REQUEST / REPORTING FORM

REQUEST FOR SPONSORSHIP		
Description of the requested sponsorship:		
Estimated Value:		
Who approved the request for the sponsorship?		
THE SPONSORS DETAILS		
Sponsoring Organisation Name:		
Sponsoring Organisation Contact (name, title and phone number):		
Does the sponsoring organisation have any relationship with the Duopharma Biotech's Businesses? Yes / No		
If Yes , does the sponsoring organisation currently have any business ongoing? (e.g. a contract, application, tender, approval and etc.) with Duopharma Biotech Berhad		
If Yes , please provide full details:		
Has Duopharma Biotech received other sponsorships from the same Organisation or its Associate Companies within the past 12 months?		
If Yes , please describe each prior sponsorship, value and date received:		
OTHER KEY DETAILS		
Please submit this form together with the supporting document on the proposed event as approved by the Highest Approving Authority.		
Name:	Signature / Date:	Business Unit:
GROUP INTERNAL AUDIT & INTEGRITY		
Name:	Signature / Date:	Remarks: