

Modern Slavery Act - Questionnaire v4

CG-F-40



| Sub-contractor/ Supplier Details | |
|------------------------------------|--|
| Company name: | |
| Types of goods/ services supplied: | |

| Required Financial Information | Answer (Yes/No) |
|---|-----------------|
| Does your company have a turnover of more than £36 million or forecast falling into this threshold over the next 12 months? | |

| Questions | Answer (Yes/No) |
|--|-----------------|
| 1. Has your organisation published a statement or policy relating to slavery and human trafficking, either by reference to Section 54 of the Modern Slavery Act 2015 or otherwise? If so, could you provide a copy with return of this questionnaire? | |
| 2. Churchill has adopted the enclosed Supplier Code of Conduct. As a Supplier of Churchill can you confirm that your organisation adheres to the principles set out in this Code? | |
| 3. If the answer to Question 2 is No, could you please clarify which of these principles are not applied and explain why? | |
| 4. Does your organisation operate established policies in relation to; | |
| • Equality and Diversity | |
| • Recruitment and Selection | |
| • Prevention of Illegal Working | |
| • Dignity at Work | |
| • Whistleblowing | |
| • Anti-Bribery | |
| • Health and Safety | |
| • Procurement | |
| • Corporate Social Responsibility | |
| 5. Does your organisation hold any independent registration in relation to business ethics, health and safety, environmental protection of other associated activities? If so, please provide more details: | |
| 6. Does your organisation procure goods or services from suppliers located, or operating outside of the United Kingdom? | |
| 7. If the answer to Question 6 is Yes, do these suppliers, or are these suppliers likely to, use unskilled or migrant workers? | |
| 8. Does your organisation conduct any audit processes in relation to your own suppliers? | |

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I can confirm that I am authorised to sign this document on behalf of the Company stated below:

Please do not use electronic signatures as these will not be accepted as confirmation of approval

| | | | |
|---------------------------|--|---------------|--|
| Your company name: | | Date: | |
| Print name: | | Signed | |
| Job title: | | | |