

STATEMENT ON CONFLICTS OF INTEREST

(INDIVIDUALS)

SUPPLIER (Name):

SUPPLIER (Code):

The undersigned, _____, born in _____ on _____, resident in _____, at _____

No. _____, acknowledges that he/she is aware that in case of his/her incomplete or false statement FINCANTIERI S.p.A. or any company of the Fincantieri Group may terminate the relevant order/contract with the undersigned and request compensation for damages, and states under his/her responsibility as follows:

	YES	NO
1.that he/she is carrying out or has carried out activities in conflict of interest with the work assigned or about to be assigned or that, during the last 24 months, he/she was in managerial positions in any company of the Fincantieri Group and could influence technical and purchasing decisions.	<input type="checkbox"/>	<input type="checkbox"/>
2.that, to the best of his/her knowledge, his/her spouse or partner, direct relatives up to the second degree, live-in partners or those personally or emotionally connected to him/her, hold executive, controlling, managerial or employee roles in any company of the Fincantieri Group.	<input type="checkbox"/>	<input type="checkbox"/>
3.that he/she has held in the last 24 months the role of public officer or carried out public service activities that have involved, even indirectly, any company of the Fincantieri Group (grant of licenses, controls of any kind, etc.).	<input type="checkbox"/>	<input type="checkbox"/>
4.that, to the best of his/her knowledge, his/her spouse, direct relatives and relatives up to the second degree, live-in partners or those personally or emotionally connected to him/her, have held in the last 24 months the role of public officers or carried out public service activities that have involved, even indirectly, any company of the Fincantieri Group (grant of licenses, controls of any kind, etc.).	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please provide detailed information to identify the conflict of interest.		

The undersigned undertakes to send this statement through the Fincantieri e-NGAGE portal (<https://engage.fincantieri.it>), along with a copy of his/her identity document, and to update this statement, should it become incomplete or not up to date, or at the request of Fincantieri or any company of the Fincantieri Group and within 5 years from the subscription date.

Date _____

(Stamp and legible signature in full)

STATEMENT ON CONFLICTS OF INTEREST

(LEGAL ENTITIES)

SUPPLIER (Business Name):

SUPPLIER (Code):

The undersigned, _____, born in _____ on _____, acting in his/her capacity of _____ of the company _____, with registered office in _____ at _____, registration number _____ with the _____ of _____ tax code _____ share capital _____ (the "Company"), acknowledges that he/she and his/her Company is aware that in case of his/her incomplete or false statement FINCANTIERI S.p.A. or any company of the Fincantieri Group may terminate the relevant order/contract with the undersigned and request compensation for damages, and states under his/her responsibility as follows:

	YES	NO
1.that his/her company employs, in business and technical relations with any company of the Fincantieri Group, former employees of the Fincantieri Group who in the last 24 months have held key positions in such Group in which they could influence purchasing decisions.	<input type="checkbox"/>	<input type="checkbox"/>
2.that, to the best of his/her knowledge, its employees have spouses, direct relatives and relatives in-laws up to the second degree, live-in partners and or those personally or emotionally connected to him/her that have executive, controlling, managerial or employee roles in any company of the Fincantieri Group.	<input type="checkbox"/>	<input type="checkbox"/>
3.that the chief executive officer (in the case of joint stock companies) / the directors (in case of limited companies) / the partners (in case of partnerships) and employees with key managerial positions, have held in the last 24 months the role of public officers or have carried public service activities that have involved, even indirectly, any company of the Fincantieri Group (grant of licenses, controls of any kind, etc.).	<input type="checkbox"/>	<input type="checkbox"/>
4.that the spouses, direct relatives and relatives up to the second degree, live-in partners or those personally or emotionally connected to the persons under item 3. above, have held in the last 24 months the role of public officers or have carried out public service activities that have involved, even indirectly, any company of the Fincantieri Group (grant of licenses, controls of any kind, etc.).	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please provide detailed information to identify the conflict of interest.		

The undersigned undertakes to send this statement through the Fincantieri e-NGAGE portal (<https://engage.fincantieri.it>), along with a copy of the identity document of its representative signing this document and to update the statement, should it become incomplete or or not up to date, or at the request of Fincantieri or any company of the Fincantieri Group and within 5 years from the subscription date.

Date _____

(Stamp and legible signature in full)

STATEMENT ON CONFLICTS OF INTEREST

CONSULTANT/ADVISOR

(LEGAL ENTITIES)

The undersigned _____, born in _____ on _____, acting in his/her capacity of _____ of the company/partnership/firm _____, with registered office in _____ at _____, registration number _____ with the _____ of _____ tax code _____ share capital _____ acknowledges that he/she is aware that in case of his/her incomplete or false statement FINCANTIERI S.p.A. or any company of the Fincantieri Group may terminate the relevant order/contract and request compensation for damages, and states under his/her responsibility as follows:

	YES	NO
1.that, in connection with the contract/assignment executed or to be executed, it is employing or has employed (i) persons that are carrying out or have carried out activities in conflict of interest with such contract/assignment, or (ii) former employees of the Fincantieri Group who in the last 24 months have held key positions in such group, from which they could influence decisions connected with the contract/assignment above	<input type="checkbox"/>	<input type="checkbox"/>
2.that, to the best of his/her knowledge (i) the spouses, direct relatives and relatives in-laws up to the second degree, live-in partners of, or (ii) those personally or emotionally connected to, the persons under item 1. above have executive, controlling, managerial or employee roles in any company of the Fincantieri Group	<input type="checkbox"/>	<input type="checkbox"/>
3.that the chief executive officer (in the case of joint stock companies) / the directors (in case of limited companies) / the partners (in case of partnerships) and employees with key management positions, have held in the last 24 months the role of public officers or have carried public service activities that have involved, even indirectly, any company of the Fincantieri Group (grant of licenses, controls of any kind, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
4.that, to the best of his/her knowledge, (i) the spouses, direct relatives and relatives up to the second degree, live-in partners of, or (ii) those personally or emotionally connected to, the persons under item 3. above have held in the last 24 months the role of public officers or have carried out public service activities that have involved, even indirectly, any company of the Fincantieri Group (grant of licenses, controls of any kind, etc.).	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please provide detailed information to identify the conflict of interest.		

The person making this statement undertakes to send this document to the email address ¹..... along with a copy of his/her identity document, and update the statement in case it becomes incomplete or not up to date (e.g. following changes in the persons involved in the execution of the contract/assignment), or at the request of Fincantieri or any company of the Fincantieri Group and within 5 years from the subscription date.

Date _____

(Stamp and legible signature in full)

¹ E-mail address of the Organizational Unit which is managing the contract/assignment or of the person responsible for the Organizational Unit which is managing the contract/assignment