



CORPORATE COMPLIANCE REPORT FORM

INSTRUCTIONS

The Saint Regis Mohawk Tribe (Tribe) accepts and investigates good-faith reports of improper governmental activities involving Tribal employees, contractors, vendors or programs, including allegations where the SRMT may be a victim of waste, fraud, abuse or conflicts of interest, involving Tribal, state or federal funds or programs.

Reports may be submitted anonymously through the Whistleblower Hotline:

Toll Free Hotline **855-990-0097**

Online Reporting: **www.lighthouse-services.com/srmt-nsn**

The SRMT Corporate Compliance Policy is available on the SRMT website. Questions regarding the policy or on the reporting process may be directed to the Corporate Compliance Office at:

Phone: (518) 358 – 2272 ext. 2174

Email: corporatecompliance@srmt-nsn.gov

BEFORE SUBMITTING YOUR REPORT

Please provide as much specific and relevant information as possible. Adequate information is necessary for Corporate Compliance to determine whether an allegation can be investigated.

- Name(s) and contact information of individual(s) involved
- Dates and locations of the alleged activity
- Names and contact information of potential witness(es)
- Documents, records, emails, pictures or other evidence
- Specific details regarding what occurred
- Information about the department, program, business or others involved
- Any other information that may help verify or investigate the allegation

If you choose to remain anonymous, please provide as much detail as possible. Include the full name(s) of individual(s) involved, contact information for witnesses and the location of where the alleged activity occurred.

REPORTER INFORMATION *(Providing your contact information is optional)*

Name:

Program/Department:

Work Location:

Best way to contact you (provide number or email):

I wish to remain anonymous

PERSON(S) INVOLVED

Please identify the individual(s), program(s), business(es), contractor(s), vendor(s) or other organizations involved in the alleged activity.

Name:

Title/Department or Organization:

Work/Business Location:

Phone/Contact information:

WITNESS(ES) INVOLVED

Please identify anyone who may have knowledge of or be able to confirm the alleged activity.

Name:

Contact information:

REPORT DETAILS

Please provide as much details as possible such as: what specifically occurred, who was involved, who witnessed, where and when did the activity occur, and what was improper and why?

SUPPORTING DOCUMENTATION AND EVIDENCE

If you have documents, records, emails, photographs, screenshots, financial information, communications or other evidence that may support your report, please list here and attach to this report.

ADDITIONAL INFORMATION

Please provide any additional information you believe may be relevant to the allegation.

CONFIDENTIALITY

Please treat this report and any supporting documentation as confidential. Information may be shared as necessary to conduct an appropriate review or investigation.

SUBMITTING YOUR REPORT

By Mail:

Corporate Compliance Officer
Saint Regis Mohawk Tribe
71 Margaret Terrance Memorial Way
Akwesasne, NY 13655

Please place the completed form in an envelope marked "CONFIDENTIAL" before mailing

By Email:

corporatecompliance@srmt-nsn.gov

Anonymous reporting:

Online: www.lighthouse-services.com/srmt-nsn

Hotline: 855-990-0097