



**GIFT, HOSPITALITY,  
ENTERTAINMENT & TRAVEL  
("GHET")  
DECLARATION FORM**

**Form A**

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QSB/IGU/03/03/02-A

Ver. 1

\*For GHET value between RM300 – RM1,000.

Please complete the details below to the best of your knowledge:

Details of Gift, Hospitality, Entertainment & Travel ("GHET") Offered				
Date of Offer	DD / MM / YYYY	Estimated/Actual Value	RM	
Name of Offeror				
Designation			Organisation	
Relationship with QSB				
Type of GHET	<input type="checkbox"/> Gift	<input type="checkbox"/> Hospitality	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Travel (incl. Accommodation) <input type="checkbox"/> Others: _____
Description of GHET				
Reason for Offer				

Decision on GHET by Recipient	
<input type="checkbox"/> Declined by Recipient.	<input type="checkbox"/> Accepted by Recipient.
<input type="checkbox"/> Transferred to Company. Please provide details of transfer:	

Declaration by Recipient			
I hereby confirm that the information I have provided above are true and correct.			
Signature		Date	
Full name			
NRIC		Staff ID	
Designation		Department	

For Integrity & Governance Unit use			
Registry of GHET		Acknowledgement by IGU	
Comments		Signature	
		Name	
		Designation	
Reference	QSB/IGU/03/03/02-A/ YY-XXX	Date	



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**Recommendation from IGU**

<input type="checkbox"/> To be returned to Offeror.		<input type="checkbox"/> To be returned to Recipient.	
Date		Date	
Details		Details	
<input type="checkbox"/> For Company use or exhibit.		<input type="checkbox"/> For equitable distribution among staff.	
Date		Date	
Department		Details Department	
Asset ID			
<input type="checkbox"/> For charitable donation.		<input type="checkbox"/> Others.	
Date		Date	
Details		Details	

**For Approval Authority use**

Action for GHET transferred to Company	Approval by (Head of Department)	
<input type="checkbox"/> To be returned to Offeror.	Comments	
<input type="checkbox"/> To be returned to Recipient.		
<input type="checkbox"/> For Company use or exhibit.		
<input type="checkbox"/> For equitable distribution among staff.	Signature	
<input type="checkbox"/> For charitable donation. Charity name:		
<input type="checkbox"/> Other. Please state:	Designation	
	Date	