

INTER OFFICE MEMORANDUM

TO : ALL EMPLOYEES

Date: January 26,2012

FROM : Mr. E.O. Capacio

CC : OPCOM

Bulletin Boards

SUBJECT: REITERATION OF POLICY ON CONFLICT OF INTEREST

The Corporate policy on conflict of interest espouses the principle that officers and employees have a duty to act in the best interest of the Company. In the event that the personal interests of an officer or an employee may conflict with the interest of the Company, proper disclosure by the officer or employee should be made and a review by higher Management should resolve the conflict. Willful concealment of a substantial conflict of interest shall be punishable by discharge in accordance with our Code of Conduct.

In line with compliance to above policy, we enjoin all employees including those who are assigned in foreign installations to accomplish the attached 2-page Full Business Interest Disclosure (FBID) Form-revised version for review and approval of your immediate and next level superior.

All accomplished and reviewed/approved forms inclusive of resolution on disclosed potential conflict of interest situation should be submitted on or before <u>February 3</u>, <u>2012</u> to HR for filing in 201 records. This accomplished FBID Form should then be discussed and updated every performance appraisal period.

For possible questions/concerns on the accomplishment of said form, please coordinate with your respective immediate superior and/or HR.

Thank you for your kind cooperation.

Noted by:

FRANCISCO S. ALEJO.III



SAN MIGUEL PURE FOODS, CO. INC. AND ITS **SUBSIDIARIES**FULL BUSINESS INTEREST DISCLOSURE (FBID) FORM (revised)

						Da —	ite:	
Name:				Plant / D	Оера	rtment:		
Position:	Division / Subsidiary:							
	of outsid	ure, ma	y directly or				elative* has interest or ne performance of your	
Officer or Employee Outside Organiza	Nature of Business Potential Conflict							
Outside Organiza	ation	Nature of Business				1 otential connec		
Close Relative* *A close relative of an ender brother or sister and each respective spouses.	mployee refe th of their re Relatio l	espective	one of the fo spouses; uncl	llowing: h e, aunt, r	nis/hei niece,	r spouse; fathe nephew or fir	er or mother; son, daughter, st cousin and each of their	
Name	to Offic	er or	Outsic Organiza			lature of Susiness	Potential Conflict	
Please use additional sl	hoot/s if no	CASSAN/						
B. GOVERNMENT R (Pls. indicate if clo	RELATION ose relative	IS e works		vernmer	nt un	it or governi	ment owned and	
Name		Posit Design				nit/GOCC igned	Relationship to Officer or Employee	
[If none, please state	"NONE".]							

Officer or Employee's Signature / Date

C. RESOLUTION OF CONFLICT OF INTEREST

1.	Recommendation of Immediate Superior:
2.	Action of Next Level Superior:

* Signatories:

* Signature of Immediate Superior / Date

Officer or Employee	Immediate Superior	Next Level Superior		
Non-officers	As followed in the	As followed in the		
	performance appraisal	performance appraisal		
Officers				
Division	Division President	SMC President		
Subsidiary/Business Unit	Subsidiary President/Head	Division President		

*Signature of Next Level Superior / Date