

CERTIFICATE APPENDIX

Summary of Findings

POURQUERY DMP joined the RJC in 2015 within the precious metals trader, refiner and/or hedger forum. This is their third certification, based on an audit conducted on 6-8th and 16th of June 2023. The below summary of audit findings complements the Member's current RJC certificate **No 0000 4820**.

Audit objective, activities, and methodology

The objective of the audit was to review the member's systems and processes to establish whether they conform to the RJC Code of Practices (COP) 2019. The audit activities included planning, conducting the audit and reporting on conformance, including corrective actions approval, as per the RJC Assessment Manual. The audit consisted of collecting / sampling and reviewing objective evidence including documentation, management and employee interviews, facility walk-through, and other observations, in relation to at least the previous 12 months.

The auditors confirm that:

- The information provided by the member is true and accurate to the best knowledge of the auditor(s) preparing the report.
- The findings are based on verified objective evidence relevant to the time period for the audit, traceable and unambiguous.
- The audit scope and audit methodology are sufficient to establish confidence that the findings are indicative of the performance of the member's defined certification scope.
- The auditor(s) have acted in a manner deemed ethical, truthful, accurate professional, independent and objective.

Description of Member Company

POURQUERY was founded in 1920 in the precious metals treatment business. Throughout the years, the Member has extended its activities to new fields like the testing of consumers' goods, but it always continued its activity with gold and precious metals. The subsidiary now called POURQUERY DMP is the one now focused exclusively on precious metals such as gold, silver, platinum, palladium and rhodium. The activities comprise refining, stamping and collecting. At the time of the audit, major works were underway on the premises.

No of sites visited:	Country/Countries:
2	France

Noteworthy achievements

- The Member is certified to the RJC Chain of Custody (CoC).

CODE OF PRACTICE 2019 PROVISIONS	RATING	COMMENTS / CONCLUSIONS
GENERAL REQUIREMENTS		
1 Legal Compliance (1.1)	Conformance	Commitments/Policies - Member was aware of applicable supra-national, national, state and local laws in place of business operation and those related to implementation of all applicable COP provisions. Efforts/Practice – Member has established a management process to maintain awareness and ensure compliance with applicable laws, including laws for the implementation of COP provisions.

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		Results/Outcomes - Based on the observed evidence during this audit, the Member was up to date with applicable laws.
2 Policy and Implementation (2.1; 2.2)	Conformance	Commitments/Policies - There were relevant policies addressing responsible business practices. There were overarching policies (e.g. Corporate Social Responsibility) and/or specific policies (e.g. Health and Safety or Modern Slavery) in place. Efforts/Practice - These policies were endorsed by senior management, regularly reviewed and communicated both internally and externally. Results/Outcomes - Adequate management processes to meet the COP requirements were in place.
3. Reporting (3.1)	Conformance	Commitments/Policies - The Member publicly issued reports on material and/or significant or relevant issues for its responsible business practices. This is done annually or more often (as per business needs). Efforts/Practice - The reports were understandable, organised, transparent and accessible. Results/Outcomes - Adequate management processes to meet the COP requirements were in place.
3 Reporting (3.2)	N/A	Not applicable to the Member's activity.
4 Financial Accounts (4.1; 4.2)	Conformance	Commitments/Policies - Financial statements of business transactions were prepared in accordance with applicable national or international standards. Efforts/Practice - A process of maintaining financial statements of business transactions in accordance with applicable national or international standards was implemented. The Member demonstrated that a third-party independent accountant reviewed the financial accounts (at least annually). Results/Outcomes - Adequate management processes to meet the COP requirements were in place for the preparation and maintenance of the financial statements.
RESPONSIBLE SUPPLY CHAINS, HUMAN RIGHTS AND DUE DILIGENCE		
5 Business Partners (5.1; 5.2)	Conformance	Commitments/Policies - There were management systems in place to identify, assess and engage with significant business partners to influence and/or promote responsible business practices, if and when required. Procedures were also implemented to identify, monitor, communicate, verify, and address non-conformances associated with the activities of contractors, indirectly employed workers, and other categories of business partners e.g. visitors. Efforts/Practice - Awareness and understanding of expectations of responsible business practices was observed in the member's business relationships and all 3-steps (identification, assessment and engagement) were in place. The management systems built on existing systems of monitoring, reporting and tracking of business partners in place to verify conformance with policies and procedures on relevant COP provisions, where appropriate.

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		Results/Outcomes - Adequate management processes to meet the COP requirements were in place to promote responsible business practices amongst significant business partners.
6 Human Rights (6.1)	Conformance	<p>Commitments/Policies – The Member had a policy endorsed at the highest level of management that reflected its operational human rights due diligence: identification, prevention, mitigation, remediation and communication practices. The policy and due diligence align and integrate with the OECD Guidance (COP Provision 7).</p> <p>Efforts/Practice - The policy, which was internally and externally communicated, described what and how the business practices human rights due diligence is conducted across all 4-steps: assessment of actual and potential human rights impacts, integrating and acting upon the findings, tracking responses and communicating the impacts.</p> <p>Results/Outcomes – The Member had an established systems to identify, track, collect, communicate the findings and seek and receive feedback from internal and external sources regularly. Member acts if found to cause, contribute or link to any human rights impacts. The response to affected stakeholders was efficient, accessible and integrated (e.g. performance contracts, surveys, audits, gender-segregated data, grievance mechanisms, as applicable).</p>
7 Due diligence for responsible sourcing from Conflict-Affected and High-Risk Areas (7.1a; 7.2)	Conformance	<p>Commitments/Policies – The Member's management systems align with the 5 steps of the OECD Due Diligence Guidance for Responsible Supply Chains of Minerals from Conflict-Affected and High-Risk Areas (CAHRAs), and/or other RJC recognised frameworks as relevant to business size, complexity and materials in scope. The policy and due diligence align with COP Provisions 6, 8, 12 and 29. Transparent processes have been established to assess all internal inventory and transaction processes to identify material inputs, product classification, type and weight of material inputs and outputs, supplier details, including KYC.</p> <p>Efforts/Practice – OECD Step 1: The policy was internally and externally communicated, and it aligns with Annex II of the OECD Guidance. There were adequate management systems in place with procedures for collecting information from suppliers and sharing it with buyers. Engagement with relevant business customers has occurred. Adequate tracking systems and records about sourced materials including its origin where appropriate, whether internally or from upstream suppliers including refiners / miners, if relevant, was observed. Member defined CAHRAs, had an established process to identify risks and a grievance mechanism. Namely, the Member had a management system in place to answer due diligence requirements. The Member has been involved in precious metal collection for many years and had an effective due diligence / KYC system for suppliers who are "clients-</p>

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		<p>bringers" as they collect metal from professionals. The Director and Quality Director are responsible for OECD compliance, and they have been interviewed. The Member has communicated its policies to its suppliers. The grievance mechanism in place was managed by the Director who was responsible for responding and resolving all the grievances, in alignment with the OECD requirements. The Member has maintained internal material control systems that can reconcile movement of inventory in and out over a given time. They have identified all sources of material, with no mined gold received or traded.</p> <p>OECD Step 2: The Member identified and assessed risks, including identification and mapping of red flags. Records were available to support risk assessment. Namely, the Member sourced metal from some suppliers but mainly collected metal from "client-bringers". The risk assessment procedure and criteria were documented, and risk assessment was done for all its suppliers and client-bringers. To analyse the risk related to "metal bringers", the Member systematically collected legal documents from them (Business licence + "Déclaration d'existence" = customs authorization) and analysed risk related to activity, country and turnover. Thus, the criteria for identifying red flags were defined, and methodology and procedure were robust. Risk analysis has been reviewed during the audit. No high-risk / red flag suppliers have been identified.</p> <p>OECD Step 3: Identified risks were reported to management, as applicable. A risk strategy has been developed and implemented to support management of risks, including any actions taken as per risks/red flags (if applicable). Performance against risk strategy was monitored. Namely, the risk assessment was approved by the Director. No red flag had been identified at the time of the audit. A procedure was in place to manage potential identified risks, or risky country, and was applied in case of doubt. One example has been reviewed for a client-bringer for a foreign country and it has been decided not to start any business relationship with them.</p> <p>OECD Step 4: Reasonable & good faith efforts to implement COP7 have been made, monitored, audited, learnt from and improved over time. A summary audit report is published, including conclusions, in collaboration with scheme owner.</p> <p>OECD Step 5: Verification and annual reporting were in place, with required elements shared with relevant stakeholders. Namely, the Member reported on their due diligence in December 2022, report available on request.</p> <p>Results/Outcomes – The Member has established accessible systems to understand and identify business partners and associated risks, assess and manage risks (if red flags are identified). The systems also support transparency, record-keeping, controls, identification of different types of materials (e.g. mined, recycled, grandfathered, as applicable), verification, monitoring</p>

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		and evaluation of improvements and public reporting on an annual basis.
7.1b Due diligence for responsible sourcing from Conflict-Affected and High-Risk Areas	N/A	Not applicable to the Member's activity.
7.3a Due diligence for responsible sourcing from Conflict-Affected and High-Risk Areas	Conformance	<p>Commitments/Policies - Adequate internal and external material control systems have been established to reconcile movement of inventory in and out over a given time, for all material inputs and outputs.</p> <p>Efforts/Practice - A functional system has been established for the internal and external material control and reconciliation.</p> <p>Results/Outcomes - The system for internal and external material controls has been developed and actively implemented.</p>
7.3b Due diligence for responsible sourcing from Conflict-Affected and High-Risk Areas	Conformance	<p>Commitments/Policies - A process has been established for collecting and annually sharing information with the RJC on the types of gold sourced and, if applicable, mine of origin of mined gold received. Where applicable, a list of mines of origin for all gold received, the identity of any mines of origin in CAHRAs and a summary of the criteria used to determine CAHRAs was included.</p> <p>Efforts/Practice - The process of collecting and sharing information with the RJC on the types of gold sourced and, if applicable, mine of origin of mined gold received, was developed and in place.</p> <p>Results/Outcomes - The process of collecting and sharing information with the RJC on the types of gold sourced and, if applicable, mine of origin of mined gold received was timely, consistent and collated on an annual basis. During the audit period, the Member did not source mined product.</p>
8 Sourcing directly from Artisanal and Small-Scale Mining (8.1)	N/A	Not applicable to the Member's activity.
9 Sourcing post-consumer industrial precious metals directly from informal recyclers (9.1)	N/A	Not applicable to the Member's activity.
10 Community Development (10.1)	Conformance	<p>Commitments/Policies - There were adequate frameworks and approaches in place for regular discussion, consultation, and interaction with stakeholders and communities. The member demonstrated awareness of the requirements under national laws.</p> <p>Efforts/Practice - Adequate stakeholder and community engagement, stakeholder mapping and practical initiatives related to core business in place (e.g. trainings, employment and staff retention opportunities, investing in local financial institutions to support local procurement, educational programmes on natural resource management and monitoring, etc.) were in place.</p>

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		Results/Outcomes – The frameworks and systems for community development were appropriately implemented.
11 Bribery and Facilitation Payments (11.1; 11.2)	Minor Non-Conformance	<p>Commitments/Policies - Either the policies and procedures were not formally documented and/or not proactively addressing corruption within all business operations and supply chains and/or there were inadequacies in protection of employees or acceptance of gift policies.</p> <p>Efforts/Practice - Either the risk management system was not adequate (e.g. identification, training, recording, investigation, sanctions) or not reviewed regularly, and/or no senior manager had been appointed.</p> <p>Results/Outcomes - Although operational, the informal policies and/or procedures or their implementations are only partial.</p> <p><i>Namely, corruption risk identification is not formalized enough, although the Member's commitments are high. The training must be conducted again because the recent turnover of staff has been high and newly hired employees have not yet been trained (11.2a)</i></p> <p><i>Corrective Actions: The Member will create an Anti-corruption procedure and will include the procedure in the employee induction leaflet. The Member will organise a training on anti-corruption for all employees.</i></p>
11 Bribery and Facilitation Payments (11.3)	N/A	There is no applicable law on facilitation payments in the jurisdictions where the Member operates.
12 Know Your Counterparty: Money laundering and finance of terrorism (12.1; 12.2; 12.3; 12.4)	Minor Non-Conformance	<p>Commitments/Policies – The Member has established documented and adequate KYC policies and for business partners, The policies contained clear responsibilities, subject to regular reviews, and proper records were maintained. The policies align with applicable laws in the areas required by this COP provision (e.g., Anti-Money Laundering (AML), The Financial Action Task Force (FATF).</p> <p>Efforts/Practice - Documented procedures were established with activities to support the 4 areas (verification, identification, checks and monitoring). The procedures described the process for reporting suspicious cash related activities to the proper authorities for cash records. Regular reviews (at least annually) of the KYC policy and procedures were established. A responsible person for implementation of KYC policy and procedures has been appointed, however gaps in implementation and training have been identified.</p> <p>Results/Outcomes - The 4-step system was appropriate to verify identities of business partners, identify high-risk counterparts, check records and monitor and report on suspicious transactions, with some implementation gaps identified.</p> <p><i>Namely, the management at one of the two sites was not applying the new KYC procedure that was updated after November 2022 (12.1a).</i></p> <p><i>Corrective actions: The Member will train staff at that site. The control of KYC will be done on Starlims (ERP). An e-learning module and associated quiz on KYC will be created for staff.</i></p>

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13 Security (13.1)		Commitments/Policies - There were adequate security policies and procedures in place that establish processes to identify structural and emerging security threats at various levels, and/or written policy or agreement on the conduct of security personnel. Efforts/Practice - A senior management function was in place for managing security risks for employees and other personnel, training, internal controls, regular consultations with stakeholders (government local enforcement, local communities) and monitoring the performance against the policies and procedures. Results/Outcomes - The policy for security risk assessments was appropriately implemented.
13 Security (13.2; 13.3; 13.4)	N/A	Not applicable to the Member's activity.
14 Provenance Claims (14.1)	Conformance	Commitments/Policies - Policies and procedures have been established to make and manage claims. Efforts/Practice - Employees, suppliers and other business partners received training and/or were updated regularly, in particular employees who deal with advertising, marketing and other sales-related and relevant communication jobs. Control, reporting, and grievance mechanisms were adequately implemented. Results/Outcomes - The systems were appropriately implemented and used to identify, document, control, train, report, and address complaints.
14 Provenance Claims (14.2; 14.3)	N/A	Not applicable to the Member's activity.
LABOUR RIGHTS AND WORKING CONDITIONS		
15 General Employment Terms (15.1; 15.2; 15.3)	Conformance	Commitments/Policies - Adequate policies and procedures have been established related to employment relationship, as well as associated labour and social security. They align to relevant national and international standards and/or collective bargaining agreements and/or a policy on gender wage gap, as applicable. Efforts/Practice - All categories of employees had their employment terms (wages, working hours, other labour, and social security) and conditions documented, and in the language(s) and forms easily understandable to them. The Member had record-keeping systems in place, regularly updated and a system of checks and controls for employees of business partners (e.g. contractors, subcontractors, labour agencies). Results/Outcomes - A system has been appropriately implemented to issue, verify, check, and control the situation with general employment terms and conditions for all categories of workers.
16 Working Hours (16.1; 16.2; 16.3; 16.4; 16.5)	Conformance	Commitments/Policies - Policies and procedures have been established related to working hours, overtime, workday breaks, rest days, holidays and leave. This included processes to report on non-conformances, and a grievance policy for violations of any of the above. They align with relevant applicable laws and/or collective bargaining agreements and COP Provisions 16 (48 hours working week, 60 hours in total working week with overtime), 18.4, 19, and 21 or the provision which provides better protection.

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		<p>Efforts/Practice - Human resources management set and oversee working hours, overtime, workday breaks, rest days, holidays and leave entitlements. The procedures were documented, and worker timekeeping processes were in place. Regular communication about the grievance procedures to employees was established and their adherence enforced.</p> <p>Results/Outcomes - Relevant policies, procedures and system have been appropriately implemented that set and oversee working hours, overtime, workday breaks, rest days, holidays and leave entitlements.</p>
17 Remuneration (17.1; 17.2; 17.3; 17.4; 17.5; 17.6; 17.7; 17.8)	Conformance	<p>Commitments/Policies – Policies and procedures have been established related to payment of legal minimum wage (not including overtime) or higher, as per prevailing industry standards, overtime wage, method of wage payments, prohibited deductions from wages, benefits, provisions, services and loans to workers. They align with applicable laws, COP Provisions 1, 16, 20, 22.1 and 23.6 and are non-discriminatory (equal pay for equal work).</p> <p>Efforts/Practice – Human resources management set and oversee wages, overtime wages, methods of wage payments, prohibition of illegal deductions from wages, benefits, provisions, services and loans to workers. Procedures, training and records were kept, implemented and communicated to workers, in a timely, regular and accessible way.</p> <p>Results/Outcomes – Relevant policies, procedures and system have been appropriately implemented that set and oversee minimum wages and overtime payments, methods of wage payments, prohibitive/illegal deductions, benefits, provisions, services and loans.</p>
18 Harassment, discipline, grievance procedures and non-retaliation (18.1; 18.2; 18.3; 18.4; 18.5)	Conformance	<p>Commitments/Policies - Integrated or stand-alone policies and procedures have been established related to zero tolerance of all forms of violence and harassment in the workplace (including gender-based violence), no matter of its severity, and they cover all types of workers. The policies and procedures also covered preventing retaliation for raising concerns at work, receiving and addressing grievances, conducting investigation and disciplinary processes and ensuring appropriate record-keeping.</p> <p>These align with applicable laws, as well as relevant COP Provisions 2, 6, 7, 17.</p> <p>Efforts/Practice - Dedicated human resources management (separate from those dealing with external grievances and complaints) has been established to set and oversee the implementation of these policies and procedures. Relevant regular training for supervisors and workers of all categories, including key staff (e.g., doctors, nurses, key personnel among security staff, etc.) was underway. There were adequate and up-to-date record-keeping of procedures and investigations, and efficient communication to all workers and supervisors.</p> <p>Results/Outcomes - Relevant policies, procedures and system have been appropriately implemented and resulted in a positive work environment without violence</p>

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		and harassment, including oversight of non-retaliation, grievance and investigation processes and relevant trainings to key personnel.
19 Child Labour (19.1; 19.2)	Conformance	<p>Commitments/Policies - Integrated or stand-alone policies and procedures prohibiting the use of child labour, including worst forms, and preventing young workers from doing hazardous work have been established. These include provisions for the remediation of child labour impacts, controls during hiring processes and/or to ensure maintenance of up-to-date employment records. They align with the ILO Conventions 138 and 182 and Recommendations 146 and 190 on minimum age for work and worst forms of child labour and requirements of the COP Provisions 6, 7, 8 and applicable laws.</p> <p>Efforts/Practice - Dedicated senior management (human resources) has been appointed. Adequate and regular communication of the labour policy has been conducted to all direct and indirect workers and business partners. Risk assessment and remediation procedure have been implemented. A heightened risk-based approach has been applied when working with labour or recruitment agencies, and hiring personnel. This included regular reviews and training on this aspect. The issues of minimum age and child labour have been integrated into the enforcement aspects of COP Provisions 6, 7, 8 requirements as relevant.</p> <p>Results/Outcomes - Relevant policies, procedures, system and remediation process have been appropriately implemented to ensure conformance with prohibition of child labour and respect of minimum age for employment.</p>
19 Child Labour (19.3)	N/A	Not applicable to the Member's activity.
20 Forced Labour (20.1; 20.2; 20.3)	Conformance	<p>Commitments/Policies - Integrated or stand-alone policies and procedures prohibiting forced labour, including all its forms, have been established. They align with relevant applicable laws, regulations and standards and requirements of the COP Provisions 6, 7, 13, 15, 17 and 18, as relevant.</p> <p>Efforts/Practice - Dedicated senior management (human resources) has been appointed. Communication of expectations to all business partners in the supply chain has been conducted. Clear standard employment contracts and grievance procedures have been communicated in writing and via trainings/sessions, and regular risk assessment of contractors, suppliers and/or labour providers, formal audits and desktop reviews of policies and procedures were in place.</p> <p>Results/Outcomes - Relevant policies, procedures, systems have been appropriately implemented to ensure conformance with prohibition of forced labour in all forms.</p>
21 Freedom of association and collective bargaining (21.1; 21.2)	Conformance	Commitments/Policies - Integrated or stand-alone policies and procedures have been established for respecting freedom of association and collective bargaining process/agreement, and prohibiting

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		discrimination against members of unions or alternative organisations allowed under applicable law. They align with relevant applicable laws and standards and requirements of the COP Provisions 16, 17, 18 and 22, where relevant and allowed under applicable law. Efforts/Practice - Dedicated senior management (human resources) has been appointed to oversee this area. There was adequate review of non-discrimination aspects in hiring, terminating and performance review process. Functioning grievance processes to address any workers concerns, including discrimination against any union/alternative organisations' members have been implemented. Communication of the rights of workers to form and/join trade unions or alternative organisations of their choice and collective bargaining process/agreement, as allowed under applicable law, has been conducted. Results/Outcomes - Relevant policies, procedures, systems have been appropriately implemented to ensure conformance with workers' rights to associate freely to access grievance mechanisms and engage in collective bargaining process/agreement, as allowed under applicable law.
21 Freedom of association and collective bargaining (21.3)	N/A	Not applicable to the Member's activity.
22.1 Non-discrimination	Conformance	Commitments/Policies - Integrated or stand-alone policies and procedures have been established for prohibiting discrimination in the workplace and they align with relevant applicable laws and standards and requirements of COP Provision 18, where relevant. Efforts/Practice - Dedicated senior management (human resources) has been appointed to oversee non-discrimination. There were regular risk assessments of operations, particular occupations, categories of workers, review of hiring, termination, promotion and performance appraisals for this aspect, regular trainings and awareness raising among workers, business partners, suppliers. Results/Outcomes - Relevant policies, procedures, systems have been appropriately implemented to ensure conformance with non-discrimination in the workplace.
HEALTH, SAFETY AND ENVIRONMENT		
23 Health and Safety (23.1; 23.2; 23.3; 23.4; 23.5; 23.6; 23.7; 23.8; 23.9)	Minor Non-Conformances	Commitments/Policies - Policies and procedures have been established to regulate safe and healthy working conditions and workplaces, including risk assessments and controls of occupational hazards, safe, decent and non-discriminatory facilities at work and on-site housing, where relevant (e.g. food, water, sanitation, fire equipment, emergency exits and lighting etc.), health and safety committees, personal protective equipment, access to adequate first aid / medical facilities and trained personnel, accessible emergency procedures and evacuation plans, incident investigations, employee training and record-keeping. These align with relevant

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		<p>applicable laws and standards and requirements of COP Provisions 6, 22, 24, 28 and 40, where relevant.</p> <p>Efforts/Practice - Dedicated health and safety person and/or appropriate people in member's business have been appointed to oversee all aspects of occupational health and safety and/or adequate arrangements for safe and healthy workplace, access to safe, decent and non-discriminatory facilities at work, record-keeping of regulations, permits, codes and licences. Workplace hazards associated with the member's activities and products have not been fully identified and risk assessed. Controls to minimise the risks of accidents and injury to employees, including providing and correctly using personal protective equipment, as applicable, have been partially implemented, with gaps identified. Emergency procedures and evacuation plans were not formalised and accessible, regularly tested and periodically updated. Employee training (and record-keeping) was being conducted in a form and language workers understand on specific role-related health and safety hazards and controls, with more training needed on appropriate action in the event of an accident or emergency, fire safety and emergency procedures, once the latter are formalised.</p> <p>Results/Outcomes - Policies, procedures, protocols, system, and mechanisms that set, oversee, monitor, and control the conformance with safe and healthy working conditions and workplaces have been partially implemented, with gaps identified. In addition, at the time of the audit, major works had started very recently, and once finalised, will improve significantly the whole organisation of the refining workshop, and especially the health & safety conditions. A new refining process will be installed.</p> <p><i>Namely, all fire exit light signs close to the stairs / the dining area were off on the day of the audit. It was apparently due to temporary works being done in the future workshop. Plus, one extinguisher was blocked in the workshop, behind a tray (23.2e).</i></p> <p><i>Corrective Actions: The Member will repair the exit light signs and move the extinguisher to another location. The Member will also update the Safety register, appoint a new safety referee, and conduct an internal audit on safety equipment.</i></p> <p><i>Namely, in the smelting workshop, the noise level was temporarily above 80 dB and no PPE was worn by workers (but they were all equipped with earplugs and knew they have to wear them). Fumes extraction was insufficient, and the chemicals storage was not adequate with MSDS not available in their designated location (23.3).</i></p> <p><i>Corrective Actions: The Member will work with agency ATANOR to increase the extraction of fumes, will increase training on use of PPE and follow-up on PPE being worn, as well as update MSDS.</i></p> <p><i>Namely, a rudimentary workshop used by workers to cut metal pieces had not been analysed from a H&S perspective. There was no warning sign, and no PPE</i></p>

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SECOND FLOOR, QUALITY HOUSE, 5-9 QUALITY COURT, CHANCERY LANE, LONDON, WC2A 1HP.

THE RESPONSIBLE JEWELLERY COUNCIL IS THE TRADING NAME OF THE COUNCIL FOR RESPONSIBLE JEWELLERY PRACTICES LTD.
REGISTERED IN ENGLAND AND WALES WITH COMPANY NUMBER 05449042.

CERTIFICATE APPENDIX

Summary of Findings

CODE OF PRACTICE 2019 PROVISIONS	RATING	COMMENTS / CONCLUSIONS
		<p>was worn. However, the activity was very low risk and no accident had ever happened. This was a very simple action of cutting metal pieces in two. There was a smelting installation which was apparently not used, but still in place with extraction. Risks must be analysed, or the machine must be removed (it was a test in 2022, but the activity has been abandoned). NB: This concerns a small workshop (20 m²) belonging to a newly acquired subsidiary (not yet included in the RJC certification scope). However, since the site is already under the responsibility of the Member from a H&S perspective, the workshop was visited (23.3).</p> <p>Corrective Actions: The Member will include the workshop in their safety management system, will conduct a risk assessment related to the entire site and create an action plan to implement and follow-up on. Namely, there is no formalized emergency procedure for both Member's sites. At one site, the key opening the 2nd fire exit was not easily accessible close to the door, and no fire drill had been conducted. (NB: However, having a secondary exit is not required by law). At the other site, the fire drill report is not detailed enough (23.5c).</p> <p>Corrective actions: The Member will create a new fire drill report template and an evacuation protocol in case of emergency, as well as organise a fire drill at the site where it was missing.</p> <p>Namely, PPE were provided free of charge, but some workers didn't wear them, although the noise level was high in the workshop (temporarily) (23.6).</p> <p>Corrective Action: The Member will follow up on workers wearing their PPE.</p>
23 Health and Safety (23.10)	N/A	Not applicable to the Member's activity.
24 Environmental Management (24.1; 24.2)	Minor Non-Conformance	<p>Commitments/Policies - The policies and procedures that state commitment to environmental management, specify responsibilities and control measures, life cycle thinking to continuous improvement, that establish training format and/or frequency and how information is communicated to relevant employees about environmental risks and controls, are not comprehensive or adequate (e.g. not all requirements are clearly defined).</p> <p>Efforts/Practice - The system to enforce policies and procedures, to complete risk assessments and to do continuous improvement cycle (Plan-Do, Check-Act), to train and communicate it all to employees in a format and language that they can easily understand was inconsistently enforced/followed.</p> <p>Results/Outcomes - The policies, procedures and systems for environmental management were insufficient to manage environmental risks and impacts. Namely, the environmental commitment doesn't reflect the real impacts of the factory and the company in general (24.1).</p> <p>Corrective Actions: The Member will write a new and more engaged environmental charter, as well as write and follow-up on all actions related to the environment.</p>

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25 Hazardous Substances (25.1; 25.2; 25.3)	Conformance	<p>Commitments/Policies - Policies and procedures have been established for the handling, use, storage, and disposal of hazardous substances, including use of alternatives in the member's business processes, and for maintaining inventory records and up-to-date accessible safety data sheets (or equivalent). They include a ban on manufacture, trade or use or specify a phased-out approach in use of chemicals and hazardous substances subject to international bans. They align with relevant applicable laws and standards and COP Provisions 23 and 24, as appropriate.</p> <p>Efforts/Practice - Adequate management systems to enforce policies and procedures and maintain inventory system and controls, including international ban of chemicals and hazardous substances were in place. Regular review of international agreements was being conducted particularly for substances subject to a phased-out program. Procurement of hazardous substances was from legitimate commercial suppliers. A responsible dedicated manager has been appointed for keeping inventory up-to-date and safety data sheets (or equivalent) accessible. The use of alternatives to hazardous substances, wherever technically feasible and economically viable, was also considered. Coordination with other relevant environmental and health and safety parts of business, as well as trainings for all relevant workers and proper and regular communication of policies, procedures, risks and operations was in place.</p> <p>Results/Outcomes - Relevant policies, procedures and systems have been appropriately implemented to handle, use, store, control, dispose, keep records and communicate risks of hazardous substances, including those which are subject to international bans and use of alternatives.</p>
26 Wastes and Emissions (26.1; 26.2)	Conformance	<p>Commitments/Policies - Policies and procedures have been established to identify, monitor and control significant wastes and emissions to air, water and land generated in the member's business processes, with clearly defined roles and responsibilities. These align with relevant applicable laws and standards and COP Provisions 24 and 27.</p> <p>Efforts/Practice - Adequate environmental management systems to identify, manage and quantify significant wastes and emissions to air, water and land, were observed to be in place and aligned with COP Provision 24. Trends were being monitored over time and used to drive continuous improvement in environmental performance. The system adopted the 4R of waste management (reduce, reuse, recycle and recover, followed by disposal of any residual waste safely) and the mitigation hierarchy, as described under COP 24 (avoid or anticipate, minimise, restore and offset).</p> <p>Results/Outcomes - Relevant policies, procedures and systems for identification and management of significant wastes and emissions to air, water and land have been appropriately implemented.</p>
27 Use of Natural Resources (27.1; 27.2; 27.3)	Conformance	<p>Commitments/Policies - Programs for the identification, monitoring and efficiency initiative(s) have been</p>

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		<p>established for energy (including renewable) and water use, as well as other significant natural resources used (e.g. forest products and plastics). These align with relevant national frameworks, targets, and/or applicable laws (e.g. EU Directive 2014/95/EU to include non-financial statements in annual reports, as applicable) and COP Provisions 3, 24.1 and 26.</p> <p>Efforts/Practice - Adequate systems were in place to monitor energy (including renewable) and water use, identify other significant natural resources used (e.g. forest products and plastics) and enforce efficiency initiatives. The systems adopted the 4 steps to calculate and improve energy (including renewable) and water use in business operations (i.e. identification, prioritisation, implementation and review steps). A responsible manager has been appointed to implement initiatives.</p> <p>Results/Outcomes - The initiatives and the system to calculate and improve the use of energy (including renewable), water and the use of other significant natural resources have been appropriately implemented.</p>
27 Use of Natural Resources (27.4)	N/A	Not applicable to the Member's activity.
GOLD, SILVER, PGM, DIAMOND AND COLOURED GEMSTONE PRODUCTS		
28 Product Disclosure (28.1; 28.2a)	Conformance	<p>Commitments/Policies - Policies, procedures and registers on product disclosure have been established, covering all materials or products in scope, that explain relevant laws, regulations and industry standards, including penalties for non-conformance. These cover representation of materials and products in selling, advertising and/or marketing, in accordance with applicable law (COP 1) regarding false and misleading representations and with internationally accepted standards.</p> <p>Efforts/Practice - Adequate systems were observed to be in place that enforce accurate representations in the selling, advertising and/or marketing of materials and products, as well as accurate record-keeping of all stages, especially during processing stage. Physical characteristics of materials and products in scope were observed to be accurately accrued and disclosed, in particular the fineness or content of gold, silver and PGM, as required by law, if in scope. Use of quality marks was in accordance with applicable law or industry standards. A senior manager has been appointed to regularly monitor implementation of applicable laws, regulations and guidance, internal policy, procedures, and register. Employees with relevant responsibilities have received training and/or were updated regularly regarding the expected processes to follow.</p> <p>Results/Outcomes - Relevant policies, procedures, registers and systems to enforce accurate representations, and record-keeping have been appropriately implemented.</p>
28 Product Disclosure (28.2b-j; 28.3)	N/A	Not applicable to the Member's activity.

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29 Kimberly Process Certification Scheme and World Diamond Council System of Warranties (29.1; 29.2; 29.3; 29.4)	N/A	Not applicable to the Member's activity.
30 Grading, analysis and appraisal (30.1; 30.2; 30.3; 30.4; 30.5; 30.6)	N/A	Not applicable to the Member's activity.
RESPONSIBLE MINING		
31 Extractive Industries Transparency Initiative (31.1; 31.2)	N/A	Not applicable to the Member's activity.
32 Stakeholder Engagement (32.1; 32.2; 32.2)	N/A	Not applicable to the Member's activity.
33 Indigenous Peoples and Free Prior Informed Consent (33.1; 33.2; 33.3)	N/A	Not applicable to the Member's activity.
34 Impact assessment (34.1; 34.2; 34.3)	N/A	Not applicable to the Member's activity.
35 Artisanal and Small-Scale Mining and Large-Scale Mining (35.1)	N/A	Not applicable to the Member's activity.
36 Resettlement (36.1)	N/A	Not applicable to the Member's activity.
37 Emergency response (37.1)	N/A	Not applicable to the Member's activity.
38 Biodiversity (38.1; 38.2; 38.3; 38.4; 38.5)	N/A	Not applicable to the Member's activity.
39 Tailings and waste rock (39.1; 39.2; 39.3; 39.4)	N/A	Not applicable to the Member's activity.
40 Cyanide (40.1)	N/A	Not applicable to the Member's activity.
41 Mercury (41.1; 41.2)	N/A	Not applicable to the Member's activity.
42 Mine rehabilitation and closure (42.1; 42.2; 42.3; 42.4)	N/A	Not applicable to the Member's activity.