

## BREACH OF PERSONALLY IDENTIFIABLE INFORMATION (PII) REPORT

<b>INITIAL REPORT</b> Date: (MM/DD/YYYY)	<b>UPDATED REPORT</b> Date: (MM/DD/YYYY)	<b>AFTER ACTION REPORT</b> Date: (MM/DD/YYYY)
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**1. GENERAL INFORMATION**

a. DATE OF BREACH <i>(MM/DD/YYYY)</i>	b. DATE BREACH DISCOVERED <i>(MM/DD/YYYY)</i>	c. DATE REPORTED TO DAC <i>(MM/DD/YYYY)</i>	d. SUBGRANT NUMBER
e. PERSON REPORTING	f. BREACH INVOLVED <i>(Click to select)</i>	g. TYPE OF BREACH <i>(Click to select)</i>	h. CAUSE OF BREACH <i>(Click to select)</i>
i. DATE BREACH REPORTED TO DOJ		j. METHOD USED TO REPORT BREACH	

POINT OF CONTACT FOR FURTHER INFORMATION:

k. FIRST NAME	l. LAST NAME	m. TITLE	
n. E-MAIL ADDRESS		o. TELEPHONE NUMBER	

MAILING ADDRESS:

p. ADDRESS	q. CITY	
	r. STATE	s. ZIP CODE

**2.a. DESCRIPTION OF BREACH** *(Up to 150 words, bullet format acceptable).* **NOTE: Do NOT include PII or Classified Information.**

**2.b. ACTIONS TAKEN IN RESPONSE TO BREACH, TO INCLUDE ACTIONS TAKEN TO PREVENT RECURRENCE AND LESSONS LEARNED** *(Up to 150 words, bullet format acceptable).* **NOTE: Do NOT include PII or Classified Information.**

<b>3.a. NUMBER OF INDIVIDUALS AFFECTED</b>		E : ( 5 ( \$ ) ) ( & 7 ( ' , 1 ' ) , ( 9 , ' 8 \$ / 6 < H 2 / 7 , ) Z ( H ' U H	
(1) VICTIM(S) OF CRIME	<input type="checkbox"/> Yes <input type="checkbox"/> No	G D \ V " Yes <input type="checkbox"/> No	
(2) VICTIM(S) FAMILIES		, I < H V 0 0 Q' R Wk k k k F D W L R Q H V G D WQH X P E H U	
(3) STATE EMPLOYEE(S)			
(4) CONSULTANT(S)		, I Q R W L I L F D W L R Q Z L O O Q R W E H P D G	
(5) CONTRACTOR(S)		W R W D O Q X P E H U R I L Q G L Y L G X D O V D I I H F W H	
(6) SUBGRANT EMPLOYEE(S)			
(7) BOAD MEMBER(S)			
(8) OTHER(S) (Specify):			
(5) If applicable, was credit monitoring offered?		(6) If Yes, number of individuals offered credit monitoring:	
<input type="checkbox"/> Yes <input type="checkbox"/> No			

**4. PERSONALLY IDENTIFIABLE INFORMATION (PII) INVOLVED IN THIS BREACH** (X all types that apply)

<input type="checkbox"/> (1) Names	<input type="checkbox"/> (7) Passwords	*If Financial Information was selected, provide additional detail:	
<input type="checkbox"/> (2) Social Security Numbers	<input type="checkbox"/> (8) Financial Information*		<input type="checkbox"/> (a) Personal financial information
<input type="checkbox"/> (3) Dates of Birth	<input type="checkbox"/> (9) Other (Specify):		<input type="checkbox"/> (b) Government credit card If yes, was issuing bank notified?
<input type="checkbox"/> (4) Protected Health Information (PHI)			<input type="checkbox"/> (c) Other (Specify): <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> (5) Personal e-mail addresses			
<input type="checkbox"/> (6) Personal home addresses			

**SELECT ALL THE FOLLOWING THAT APPLY TO THIS BREACH**

<input checked="" type="checkbox"/> D 3 \$ 3 ( 5 ' 2 & 8 0 ( (If selected, provide additional detail)	<input checked="" type="checkbox"/> 6 E ( 4 8 , 3 0 ( 1 7 (If selected, provide additional detail)
<input type="checkbox"/> (1) Paper documents faxed	<input type="checkbox"/> (1) Location of equipment
<input type="checkbox"/> (2) Paper documents/records mailed	<input type="checkbox"/> (2) Equipment disposed of improperly
<input type="checkbox"/> (3) Paper documents/records disposed of improperly	<input type="checkbox"/> (3) Equipment owner
<input type="checkbox"/> (4) Unauthorized disclosure of paper documents/records	<input type="checkbox"/> (4) Government equipment Data At Rest (DAR) encrypted
<input type="checkbox"/> (5) Other (Specify):	<input type="checkbox"/> (5) Government equipment password or PKI/CAC protected
	<input type="checkbox"/> (6) Personal equipment password protected or commercially encrypted

F , ) ( 4 8 , 3 0 ( 1 7 1 8 0 % ( 5 2 ) , 7 ( 0 6 , 1 9 2 / 9 ( ' )		
<input type="checkbox"/> (1) Laptop/Tablet	<input type="checkbox"/> (4) MP3 player	<input type="checkbox"/> (7) Flash drive/USB stick/other removable media (If Other, Specify):
<input type="checkbox"/> (2) Cell phone	<input type="checkbox"/> (5) Printer/Copier/Fax/Scanner	<input type="checkbox"/> (8) External hard drive
<input type="checkbox"/> (3) Personal Digital Assistant	<input type="checkbox"/> (6) Desktop computer	<input type="checkbox"/> (9) Other

<input type="checkbox"/> G ( 0 \$ If selected, provide additional detail)	<input type="checkbox"/> H , 1 ) 2 ' , 6 6 ( If selected, provide additional detail)
<input type="checkbox"/> (1) Email encrypted	<input type="checkbox"/> (1) Information was posted to the Internet
<input type="checkbox"/> (2) Email was sent to commercial account (i.e., .com or .net)	<input type="checkbox"/> (2) Information was posted to an intranet (e.g., SharePoint or Portal)
<input type="checkbox"/> (3) Email was sent to other Federal agency	<input type="checkbox"/> (3) Information was accessible to others without need-to-know on a share drive
<input type="checkbox"/> (4) Email recipients had a need to know	<input type="checkbox"/> (4) Information was disclosed verbally
	<input type="checkbox"/> (5) Recipients had a need to know

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<b>6.a. WAS THE BREACH REPORTED TO LAW ENFORCMENT? IF YES, WHAT AGENCY RECEIVED</b>	<b>IMPACT DETERMINATION</b> (for ) R U ' \$ & Xse only) (X one)
	<input type="checkbox"/> Low <input type="checkbox"/> Medium <input type="checkbox"/> High

F \$ ' ' , 7 , 2 1 \$ / 1 2 7 ( 6 (Up to 150 words, but NOTE: Do NOT include PII or Classified Information.)

**INSTRUCTIONS FOR COMPLETING DAC  
BREACH OF PERSONALLY IDENTIFIABLE INFORMATION (PII) REPORT**

**Select Initial, Updated, or After Action Report and enter the date.**

**1. GENERAL INFORMATION.**

- a. Date of Breach. Enter the date the breach occurred. If the specific date cannot be determined, enter an estimated date and provide further explanation in the notes section of the report.
- b. Date Breach Discovered. Enter the date the breach was initially discovered employee or contractor.
- c. Date Reported to DAC. Enter the date organization reported to DAC.
- d. Subgrant Number(s) currently funded.
- e. Person reporting breach to DAC.
- f. Breach involved (click to select from the drop-down list).
- g. Type of breach (click to select from the drop-down list).
- h. Cause of breach (click to select from drop-down list).
- i. Date breach reported to DOJ (leave blank).
- j. Method used to report breach to DAC.
- k. - s. Organization's point of contact for further information.

**2.a. DESCRIPTION OF BREACH** (Up to 150 words, bullet format acceptable). Note: Do not include PII or classified information. Summarize the facts or circumstances of the theft, loss or compromise of PII as currently known, including: the description of the parties involved in the breach; the physical or electronic storage location of the data at risk; if steps were immediately taken to contain the breach; whether the breach is an isolated incident or a systemic problem; who conducted the investigation of the breach; and any other pertinent information.

**2b. ACTIONS TAKEN IN RESPONSE TO BREACH, TO INCLUDE ACTIONS TAKEN TO PREVENT RECURRENCE AND LESSONS LEARNED** (Up to 150 words, bullet format acceptable). Note: Do not include PII or classified information. Summarize steps taken to mitigate actual or potential harm to the individuals affected and the organization. For example, training, disciplinary action, policy development or modification, information systems modifications. List any findings resulting from the investigation of the breach.

**3.a. NUMBER OF INDIVIDUALS AFFECTED.** For each category of individuals listed, enter the number of individuals affected by the breach. Do not include an individual in more than one category.

**b.** Were affected individuals notified? Check box "Yes" or "No". If the individuals affected will not receive a formal notification letter about the breach, select "No" and enter an explanation of why the Component determined notification was not necessary in 3.b.(4). If additional space is needed for this justification, continue text in 6.c., Additional Notes.

(1) If affected individuals were notified, were they notified within 10 working days? Check "Yes" or "No".

(2) If the affected individuals will be notified of the breach, provide the date the notification letters were sent or date to be sent.

(3) Number of individuals notified.

(4) If notification will not be made, explain why, or If the number of individuals notified differs from total number of individuals affected, explain why.

(5) Was credit monitoring offered, if applicable? Select "Yes" or "No".

Note: This is a risk of harm based decision to be made by organization.

(6) If "Yes", enter the number of individuals offered credit monitoring.

**4. PERSONALLY IDENTIFIABLE INFORMATION (PII) INVOLVED IN THIS BREACH.** Select all that apply. If Financial Information is selected, provide additional details.

**5. SELECT ALL THE FOLLOWING THAT APPLY TO THIS BREACH.**

Check at least one box from the options given. If you need to use the "Other" option, you must specify other equipment involved.

a. Paper Documents/Records. If you choose Paper Documents/Records, answer each associated question by selecting from the options.

b. - c. Equipment. If you choose Equipment, answer the associated questions by selecting from the options. Enter a number in the empty field indicating how many pieces of each type of equipment were involved in the breach. If "Other", you will need to specify what type of equipment was involved.

d. - e. Email and Info Dissemination. If Email or Info Dissemination is selected, choose either "Yes" or "No" for all of the questions.

**6.a. WAS BREACH REPORTED TO LAW ENFORCMENT.** Select from drop down. If the agency is not listed, select "Other" and describe.

b. Impact Determination. (DAC Official Use Only) Select one: What is the overall risk level associated with this breach?

**Risk is determined by considering the likelihood that the PII can be accessed by an unauthorized person and assessing the impact to the organization and individual if the PII is misused.**

c. Additional Notes. This field can be used to convey additional information.