DATA BREACH REPORT FORM

If you know or suspect a data breach has occurred, please:

- complete this form, and
- email it to the DataPrivacyManager@MarshallADG.com, ensuring you mark your email or the form as urgent

Name and contact details of person notifying the actual or suspected breach	[Insert name and contact details]
	If you wish to submit an anonymous report, leave this section blank.
Dept/manager	[Insert department from which the report emanated and the relevant manager]
Type of data breached	Give details of the type of Data that has been breached.
Date of actual or suspected breach	[Insert date]
Date of discovery of actual or suspected breach	[Insert date]
Date of this report	[Insert date]
Summary of the facts	[Provide as much information as possible—including the amount, sensitivity and type of data involved]
Cause of the actual or suspected breach	[Provide a detailed account of what happened]
Is the actual or suspected breach ongoing?	[Yes OR No]
Who is or could be affected by the actual or suspected breach?	[Include details of categories and approximate number of individuals concerned]
	Do not notify affected individual. The data breach team will determine who should be notified and how.
Are you aware of any related or other breaches?	[Yes OR No]
	[If yes, provide more details]