**APPENDIX D (REQUIRED FORMS)**

**EXHIBIT 22 (COMPLIANCE WITH DATA ENCRYPTION REQUIREMENTS)**

Proposer shall provide information about its data encryption practices. Proposer acknowledges that the information provided on this form certifies that Proposer will comply with County of Los Angeles Board of Supervisor’s Policy Manual Chapter 5 (Contracting and Purchasing) Policy Number 5.200 (Contractor Protection of Electronic County Information) at the commencement of and during the term of the Subaward which may be granted pursuant to this solicitation.

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| --- | --- | --- |
| **REQUIREMENT** | **COMPLIANCE RESPONSE** | **VALIDATION/**  **ATTESTATION REPORTS AVAILABLE** |
| Will County Information Assets (defined in Appendix A (Sample Subaward), Exhibit P (Definitions)) stored on your workstation(s) be encrypted? | Choose an item. | Choose an item. |
| Will County Information Assets stored on your laptop(s) be encrypted? | Choose an item. | Choose an item. |
| Will County Information Assets stored on removable media be encrypted? | Choose an item. | Choose an item. |
| Will County data be encrypted when transmitted? | Choose an item. | Choose an item. |
| Will County Information Assets be stored on remote servers (i.e., cloud storage, Software-as-a-Service (SaaS))? | Choose an item. | Choose an item. |
| Will Proposer maintain a copy of any validation/attestation reports generated by its encryption tools? | Choose an item. |  |

**Declaration**

I declare under penalty of perjury under the laws of the State of California that the information stated herein is true and correct.

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| Click here to enter text. | | |
| Proposer’s Name | | |
| Click here to enter text. |  | Click here to enter text. |
| Name of Authorized Representative |  | Title of Authorized Representative |
|  |  | Click here to enter a date. |
| Authorized Representative’s Signature |  | Date |