



# **Payment Card Industry (PCI) Data Security Standard**

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## **Attestation of Compliance for Onsite Assessments – Service Providers**

**Version 3.2**

April 2016

## Section 1: Assessment Information

### Instructions for Submission

This Attestation of Compliance must be completed as a declaration of the results of the service provider's assessment with the *Payment Card Industry Data Security Standard Requirements and Security Assessment Procedures (PCI DSS)*. Complete all sections: The service provider is responsible for ensuring that each section is completed by the relevant parties, as applicable. Contact the requesting payment brand for reporting and submission procedures.

#### Part 1. Service Provider and Qualified Security Assessor Information

##### Part 1a. Service Provider Organization Information

|                   |                             |                          |                        |
|-------------------|-----------------------------|--------------------------|------------------------|
| Company Name:     | Systems East, Inc.          | DBA (doing business as): |                        |
| Contact Name:     | Peter Rogati                | Title:                   | Director of Operations |
| Telephone:        | 607-753-6156                | E-mail:                  | peter@systemseast.com  |
| Business Address: | 6 Locust Ave                | City:                    | Cortland               |
| State/Province:   | NY                          | Country:                 | USA                    |
|                   |                             | Zip:                     | 13045                  |
| URL:              | https://www.systemseast.com |                          |                        |

##### Part 1b. Qualified Security Assessor Company Information (if applicable)

|                        |                           |          |                     |
|------------------------|---------------------------|----------|---------------------|
| Company Name:          | Securisea, Inc.           |          |                     |
| Lead QSA Contact Name: | Josh Daymont              | Title:   | Principal           |
| Telephone:             | 415-494-8215              | E-mail:  | joshd@securisea.com |
| Business Address:      | 10 Glenlake Pkwy          | City:    | Atlanta             |
| State/Province:        | GA                        | Country: | USA                 |
|                        |                           | Zip:     | 30328               |
| URL:                   | https://www.securisea.com |          |                     |

## Part 2. Executive Summary

### Part 2a. Scope Verification

Services that were INCLUDED in the scope of the PCI DSS Assessment (check all that apply):

Name of service(s) assessed: Xpress-Pay

Type of service(s) assessed:

#### Hosting Provider:

- Applications / software
- Hardware
- Infrastructure / Network
- Physical space (co-location)
- Storage
- Web
- Security services
- 3-D Secure Hosting Provider
- Shared Hosting Provider
- Other Hosting (specify):

#### Managed Services (specify):

- Systems security services
- IT support
- Physical security
- Terminal Management System
- Other services (specify):

#### Payment Processing:

- POS / card present
- Internet / e-commerce
- MOTO / Call Center
- ATM
- Other processing (specify):

Account Management

Fraud and Chargeback

Payment Gateway/Switch

Back-Office Services

Issuer Processing

Prepaid Services

Billing Management

Loyalty Programs

Records Management

Clearing and Settlement

Merchant Services

Tax/Government Payments

Network Provider

Others (specify):

**Note:** These categories are provided for assistance only, and are not intended to limit or predetermine an entity's service description. If you feel these categories don't apply to your service, complete "Others." If you're unsure whether a category could apply to your service, consult with the applicable payment brand.

**Part 2a. Scope Verification** *(continued)*

**Services that are provided by the service provider but were NOT INCLUDED in the scope of the PCI DSS Assessment** (check all that apply):

Name of service(s) not assessed: All other services not listed above

Type of service(s) not assessed:

|  |  |  |
|--|--|--|
| <p><b>Hosting Provider:</b></p> <input type="checkbox"/> Applications / software<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Infrastructure / Network<br><input type="checkbox"/> Physical space (co-location)<br><input type="checkbox"/> Storage<br><input type="checkbox"/> Web<br><input type="checkbox"/> Security services<br><input type="checkbox"/> 3-D Secure Hosting Provider<br><input type="checkbox"/> Shared Hosting Provider<br><input type="checkbox"/> Other Hosting (specify): | <p><b>Managed Services (specify):</b></p> <input type="checkbox"/> Systems security services<br><input type="checkbox"/> IT support<br><input type="checkbox"/> Physical security<br><input type="checkbox"/> Terminal Management System<br><input type="checkbox"/> Other services (specify): | <p><b>Payment Processing:</b></p> <input type="checkbox"/> POS / card present<br><input type="checkbox"/> Internet / e-commerce<br><input type="checkbox"/> MOTO / Call Center<br><input type="checkbox"/> ATM<br><input type="checkbox"/> Other processing (specify): |
| <input type="checkbox"/> Account Management  | <input type="checkbox"/> Fraud and Chargeback  | <input type="checkbox"/> Payment Gateway/Switch  |
| <input type="checkbox"/> Back-Office Services  | <input type="checkbox"/> Issuer Processing   | <input type="checkbox"/> Prepaid Services  |
| <input type="checkbox"/> Billing Management  | <input type="checkbox"/> Loyalty Programs  | <input type="checkbox"/> Records Management  |
| <input type="checkbox"/> Clearing and Settlement   | <input type="checkbox"/> Merchant Services   | <input type="checkbox"/> Tax/Government Payments   |
| <input type="checkbox"/> Network Provider  |  |  |
| <input type="checkbox"/> Others (specify):   |  |  |

Provide a brief explanation why any checked services were not included in the assessment: Other services are out of scope and do not store, process or transmit CHD

**Part 2b. Description of Payment Card Business**

|  |  |
|--|--|
| Describe how and in what capacity your business stores, processes, and/or transmits cardholder data.                                   | Systems East, Inc. stores, transmits and processes CHD in order to process payments and facilitate transactions for its clients.                                       |
| Describe how and in what capacity your business is otherwise involved in or has the ability to impact the security of cardholder data. | Systems East does not directly or otherwise impact the security of its client's CDEs except in so far as clients share credit card information with Systems East, Inc. |

**Part 2c. Locations**

List types of facilities (for example, retail outlets, corporate offices, data centers, call centers, etc.) and a summary of locations included in the PCI DSS review.

| Type of facility:              | Number of facilities of this type | Location(s) of facility (city, country): |
|--------------------------------|-----------------------------------|--|
| <i>Example: Retail outlets</i> | 3                                 | Boston, MA, USA                          |
| Office                         | 2                                 | Cortland, New York, Florida              |
|                                |                                   |  |
|                                |                                   |  |

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |

**Part 2d. Payment Applications**

Does the organization use one or more Payment Applications?  Yes  No

Provide the following information regarding the Payment Applications your organization uses:

| Payment Application Name                     | Version Number | Application Vendor | Is application PA-DSS Listed?                                       | PA-DSS Listing Expiry date (if applicable)   |
|--|----------------|--------------------|---|--|
| Internal Only Payment Application XPress-Pay | N/A            | Systems East       | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | N/A -- Xpress Pay is not eligible for PA DSS |
|  |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No            |  |
|  |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No            |  |
|  |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No            |  |
|  |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No            |  |
|  |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No            |  |
|  |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No            |  |

**Part 2e. Description of Environment**

Provide a **high-level** description of the environment covered by this assessment.

*For example:*

- *Connections into and out of the cardholder data environment (CDE).*
- *Critical system components within the CDE, such as POS devices, databases, web servers, etc., and any other necessary payment components, as applicable.*

The CDE includes a number of servers hosted within ViaWest

Does your business use network segmentation to affect the scope of your PCI DSS environment?

*(Refer to "Network Segmentation" section of PCI DSS for guidance on network segmentation)*

Yes  No

**Part 2f. Third-Party Service Providers**

Does your company have a relationship with a Qualified Integrator & Reseller (QIR) for the purpose of the services being validated?

Yes  No

If Yes:

Name of QIR Company:

QIR Individual Name:

Description of services provided by QIR:

Does your company have a relationship with one or more third-party service providers (for example, Qualified Integrator Resellers (QIR), gateways, payment processors, payment service providers (PSP), web-hosting companies, airline booking agents, loyalty program agents, etc.) for the purpose of the services being validated?

Yes  No

**If Yes:**

| Name of service provider: | Description of services provided: |
|---------------------------|-----------------------------------|
| ViaWest                   | Hosting provider                  |
|                           |                                   |
|                           |                                   |
|                           |                                   |
|                           |                                   |
|                           |                                   |

**Note:** Requirement 12.8 applies to all entities in this list.

## Part 2g. Summary of Requirements Tested

For each PCI DSS Requirement, select one of the following:

- **Full** – The requirement and all sub-requirements of that requirement were assessed, and no sub-requirements were marked as “Not Tested” or “Not Applicable” in the ROC.
- **Partial** – One or more sub-requirements of that requirement were marked as “Not Tested” or “Not Applicable” in the ROC.
- **None** – All sub-requirements of that requirement were marked as “Not Tested” and/or “Not Applicable” in the ROC.

For all requirements identified as either “Partial” or “None,” provide details in the “Justification for Approach” column, including:

- Details of specific sub-requirements that were marked as either “Not Tested” and/or “Not Applicable” in the ROC
- Reason why sub-requirement(s) were not tested or not applicable

**Note:** One table to be completed for each service covered by this AOC. Additional copies of this section are available on the PCI SSC website.

| Name of Service Assessed: |                                     | Systems East, Inc. / XPress-Pay     |                                     |   |
|---------------------------|-------------------------------------|-------------------------------------|-------------------------------------|---|
| PCI DSS Requirement       | Details of Requirements Assessed    |                                     |                                     | Justification for Approach<br><small>(Required for all “Partial” and “None” responses. Identify which sub-requirements were not tested and the reason.)</small> |
|                           | Full                                | Partial                             | None                                |   |
| Requirement 1:            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |   |
| Requirement 2:            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <b>2.1.1 is not applicable since there is no wireless in scope</b>  |
| Requirement 3:            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |   |
| Requirement 4:            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <b>4.1.1 is not applicable since there is no wireless in scope</b>  |
| Requirement 5:            | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |   |
| Requirement 6:            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |   |
| Requirement 7:            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |   |
| Requirement 8:            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |   |
| Requirement 9:            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <b>Requirement 9.9 is not applicable as the company does not use any POS systems</b>  |
| Requirement 10:           | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |   |
| Requirement 11:           | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |   |
| Requirement 12:           | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/>            |   |
| Appendix A1:              | <input type="checkbox"/>            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <b>Systems East is not a shared service provider</b>  |

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|              |                          |                          |                                     |                            |
|--------------|--------------------------|--------------------------|-------------------------------------|----------------------------|
| Appendix A2: | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <b>No early TLS in use</b> |
|--------------|--------------------------|--------------------------|-------------------------------------|----------------------------|

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## Section 2: Report on Compliance

This Attestation of Compliance reflects the results of an onsite assessment, which is documented in an accompanying Report on Compliance (ROC).

|  |   |  |
|--|---|--|
| The assessment documented in this attestation and in the ROC was completed on: | 5/22/17                                 |  |
| Have compensating controls been used to meet any requirement in the ROC?       | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| Were any requirements in the ROC identified as being not applicable (N/A)?     | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| Were any requirements not tested?  | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| Were any requirements in the ROC unable to be met due to a legal constraint?   | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |

## Section 3: Validation and Attestation Details

### Part 3. PCI DSS Validation

This AOC is based on results noted in the ROC dated 5/22/2017.

Based on the results documented in the ROC noted above, the signatories identified in Parts 3b-3d, as applicable, assert(s) the following compliance status for the entity identified in Part 2 of this document (**check one**):

| <input checked="" type="checkbox"/> | <p><b>Compliant:</b> All sections of the PCI DSS ROC are complete, all questions answered affirmatively, resulting in an overall <b>COMPLIANT</b> rating; thereby <i>Systems East, Inc.</i> has demonstrated full compliance with the PCI DSS.</p>   |                      |  |  |  |  |  |
|-------------------------------------|--|----------------------|--|--|--|--|--|
| <input type="checkbox"/>            | <p><b>Non-Compliant:</b> Not all sections of the PCI DSS ROC are complete, or not all questions are answered affirmatively, resulting in an overall <b>NON-COMPLIANT</b> rating, thereby (<i>Service Provider Company Name</i>) has not demonstrated full compliance with the PCI DSS.</p> <p><b>Target Date</b> for Compliance:</p> <p>An entity submitting this form with a status of Non-Compliant may be required to complete the Action Plan in Part 4 of this document. <i>Check with the payment brand(s) before completing Part 4.</i></p>   |                      |  |  |  |  |  |
| <input type="checkbox"/>            | <p><b>Compliant but with Legal exception:</b> One or more requirements are marked "Not in Place" due to a legal restriction that prevents the requirement from being met. This option requires additional review from acquirer or payment brand.</p> <p><i>If checked, complete the following:</i></p> <table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 35%;">Affected Requirement</th> <th>Details of how legal constraint prevents requirement being met</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table> | Affected Requirement | Details of how legal constraint prevents requirement being met |  |  |  |  |
| Affected Requirement                | Details of how legal constraint prevents requirement being met   |                      |  |  |  |  |  |
|                                     |  |                      |  |  |  |  |  |
|                                     |  |                      |  |  |  |  |  |

### Part 3a. Acknowledgement of Status

Signatory(s) confirms:

(Check all that apply)

|                                     |   |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | The ROC was completed according to the <i>PCI DSS Requirements and Security Assessment Procedures, Version 3.2</i> , and was completed according to the instructions therein. |
| <input checked="" type="checkbox"/> | All information within the above-referenced ROC and in this attestation fairly represents the results of my assessment in all material respects.                              |
| <input checked="" type="checkbox"/> | I have confirmed with my payment application vendor that my payment system does not store sensitive authentication data after authorization.                                  |
| <input checked="" type="checkbox"/> | I have read the PCI DSS and I recognize that I must maintain PCI DSS compliance, as applicable to my environment, at all times.   |
| <input checked="" type="checkbox"/> | If my environment changes, I recognize I must reassess my environment and implement any additional PCI DSS requirements that apply.   |

**Part 3a. Acknowledgement of Status (continued)**

- No evidence of full track data<sup>1</sup>, CAV2, CVC2, CID, or CVV2 data<sup>2</sup>, or PIN data<sup>3</sup> storage after transaction authorization was found on ANY system reviewed during this assessment.
- ASV scans are being completed by the PCI SSC Approved Scanning Vendor *Alert Logic*

**Part 3b. Service Provider Attestation**

*[Handwritten Signature]*  
 Signature of Service Provider Executive Officer ↑      Date: *MAY 25, 2017*  
 Service Provider Executive Officer Name:      Title: *PRESIDENT*

**Part 3c. Qualified Security Assessor (QSA) Acknowledgement (if applicable)**

If a QSA was involved or assisted with this assessment, describe the role performed:      *Securisea performed a full PCI Assessment and issued a complete PCI DSS 3.2 Report on Compliance.*

*[Handwritten Signature]*  
 Signature of Duly Authorized Officer of QSA Company ↑      Date: *5/22/2017*  
 Duly Authorized Officer Name: *Josh Daymont*      QSA Company: *Securisea*

**Part 3d. Internal Security Assessor (ISA) Involvement (if applicable)**

If an ISA(s) was involved or assisted with this assessment, identify the ISA personnel and describe the role performed:

<sup>1</sup> Data encoded in the magnetic stripe or equivalent data on a chip used for authorization during a card-present transaction. Entities may not retain full track data after transaction authorization. The only elements of track data that may be retained are primary account number (PAN), expiration date, and cardholder name.  
<sup>2</sup> The three- or four-digit value printed by the signature panel or on the face of a payment card used to verify card-not-present transactions.  
<sup>3</sup> Personal identification number entered by cardholder during a card-present transaction, and/or encrypted PIN block present within the transaction message.

## Part 4. Action Plan for Non-Compliant Requirements

Select the appropriate response for “Compliant to PCI DSS Requirements” for each requirement. If you answer “No” to any of the requirements, you may be required to provide the date your Company expects to be compliant with the requirement and a brief description of the actions being taken to meet the requirement.

*Check with the applicable payment brand(s) before completing Part 4.*

| PCI DSS Requirement | Description of Requirement   | Compliant to PCI DSS Requirements<br>(Select One) |                          | Remediation Date and Actions<br>(If “NO” selected for any Requirement) |
|---------------------|--|---|--------------------------|--|
|                     |  | YES   | NO                       |  |
| 1                   | Install and maintain a firewall configuration to protect cardholder data                 | <input checked="" type="checkbox"/>               | <input type="checkbox"/> |  |
| 2                   | Do not use vendor-supplied defaults for system passwords and other security parameters   | <input checked="" type="checkbox"/>               | <input type="checkbox"/> |  |
| 3                   | Protect stored cardholder data   | <input checked="" type="checkbox"/>               | <input type="checkbox"/> |  |
| 4                   | Encrypt transmission of cardholder data across open, public networks                     | <input checked="" type="checkbox"/>               | <input type="checkbox"/> |  |
| 5                   | Protect all systems against malware and regularly update anti-virus software or programs | <input checked="" type="checkbox"/>               | <input type="checkbox"/> |  |
| 6                   | Develop and maintain secure systems and applications                                     | <input checked="" type="checkbox"/>               | <input type="checkbox"/> |  |
| 7                   | Restrict access to cardholder data by business need to know                              | <input checked="" type="checkbox"/>               | <input type="checkbox"/> |  |
| 8                   | Identify and authenticate access to system components                                    | <input checked="" type="checkbox"/>               | <input type="checkbox"/> |  |
| 9                   | Restrict physical access to cardholder data  | <input checked="" type="checkbox"/>               | <input type="checkbox"/> |  |
| 10                  | Track and monitor all access to network resources and cardholder data                    | <input checked="" type="checkbox"/>               | <input type="checkbox"/> |  |
| 11                  | Regularly test security systems and processes  | <input checked="" type="checkbox"/>               | <input type="checkbox"/> |  |
| 12                  | Maintain a policy that addresses information security for all personnel                  | <input checked="" type="checkbox"/>               | <input type="checkbox"/> |  |
| Appendix A1         | Additional PCI DSS Requirements for Shared Hosting Providers                             | <input checked="" type="checkbox"/>               | <input type="checkbox"/> |  |
| Appendix A2         | Additional PCI DSS Requirements for Entities using SSL/early TLS                         | <input checked="" type="checkbox"/>               | <input type="checkbox"/> |  |

