

Data Breach Escalation Sheet

Incident Details

Date/Time of Breach	
Discovered By	
Reported By	
Department	
Location	

Description of Breach

Type of Breach

<input type="checkbox"/> Unauthorized Access	<input type="checkbox"/> Malware/Ransomware
<input type="checkbox"/> Data Leak/Exposure	<input type="checkbox"/> Lost/Stolen Device
<input type="checkbox"/> Other:	

Data Involved

Type/Description	Estimated Volume

Immediate Actions Taken

Persons Notified

Name/Role	Date Notified	Contact Method

Escalation

Escalated To	Date/Time	Next Steps

Additional Notes