



# **Payment Card Industry Data Security Standard**

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## **Attestation of Compliance for Report on Compliance – Service Providers**

**Version 4.0**

Publication Date: March 2022



# **PCI DSS v4.0 Attestation of Compliance for Report on Compliance – Service Providers**

**Entity Name: SequenceShift Operations Pty Ltd**

**Assessment End Date: 5 June 2023**

**Date of Report as noted in the Report on Compliance: 30 June 2023**



## Section 1 Assessment Information

### Instructions for Submission

This Attestation of Compliance (AOC) must be completed as a declaration of the results of the service provider's assessment against the *Payment Card Industry Data Security Standard (PCI DSS) Requirements and Testing Procedures* ("Assessment"). Complete all sections. The service provider is responsible for ensuring that each section is completed by the relevant parties, as applicable. Contact the entity(ies) to which this AOC will be submitted for reporting and submission procedures.

This AOC reflects the results documented in an associated Report on Compliance (ROC). Associated ROC sections are noted in each AOC Part/Section below.

Capitalized terms used but not otherwise defined in this document have the meanings set forth in the PCI DSS Report on Compliance Template.

#### Part 1. Contact Information

##### Part 1a. Assessed Entity (ROC Section 1.1)

Company name:	SequenceShift Operations Pty Ltd
DBA (doing business as):	SequenceShift
Company mailing address:	11/5 Sunhill Place, North Ryde, Sydney, NSW, Australia, 2113
Company main website:	<a href="https://sequenceshift.com/">https://sequenceshift.com/</a>
Company contact name:	Dmitri Muntean
Company contact title:	Managing Director
Contact phone number:	+61 424 407 794
Contact e-mail address:	dmitri.muntean@sequenceshift.com

##### Part 1b. Assessor (ROC Section 1.1)

Provide the following information for all assessors involved in the Assessment. If there was no assessor for a given assessor type, enter Not Applicable

##### PCI SSC Internal Security Assessor(s)

ISA name(s):	Not Applicable
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##### Qualified Security Assessor

Company name:	Cloudtrace Pty Ltd
Company mailing address:	Level 8, 11-17 York Street, Sydney, NSW, Australia, 2000
Company website:	<a href="https://cloudtrace.com.au/">https://cloudtrace.com.au/</a>
Lead Assessor name:	Gareth Batchelor
Assessor phone number:	+61 2 8188 3773
Assessor e-mail address:	gbatchelor@cloudtrace.com.au
Assessor certificate number:	204-568



## Part 2. Executive Summary

### Part 2a. Scope Verification

#### Services that were **INCLUDED** in the scope of the Assessment (select all that apply):

Name of service(s) assessed:	Payline, Secure Payments IVR, EDC API, Pull Gateway, Web Payments, Chat Payments	
Type of service(s) assessed:		
<b>Hosting Provider:</b> <input type="checkbox"/> Applications / software <input type="checkbox"/> Hardware <input type="checkbox"/> Infrastructure / Network <input type="checkbox"/> Physical space (co-location) <input type="checkbox"/> Storage <input type="checkbox"/> Web-hosting services <input type="checkbox"/> Security services <input type="checkbox"/> 3-D Secure Hosting Provider <input type="checkbox"/> Multi-Tenant Service Provider <input type="checkbox"/> Other Hosting (specify):	<b>Managed Services (specify):</b> <input type="checkbox"/> Systems security services <input type="checkbox"/> IT support <input type="checkbox"/> Physical security <input type="checkbox"/> Terminal Management System <input type="checkbox"/> Other services (specify):	<b>Payment Processing:</b> <input type="checkbox"/> POI / card present <input checked="" type="checkbox"/> Internet / e-commerce <input checked="" type="checkbox"/> MOTO / Call Center <input type="checkbox"/> ATM <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):		

**Note:** These categories are provided for assistance only and are not intended to limit or predetermine an entity's service description. If these categories do not apply to the assessed service, complete "Others." If it is not clear whether a category could apply to the assessed service, consult with the entity(ies) to which this AOC will be submitted.



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

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

Name of service(s) not assessed:

Type of service(s) not assessed:

#### Hosting Provider:

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

#### Managed Services (specify):

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

#### Payment Processing:

- POI / 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):

Provide a brief explanation why any checked services were not included in the Assessment:

### Part 2b. Description of Role with Payment Cards (ROC Section 2.1)

Describe how the business stores, processes, and/or transmits account data.

SequenceShift provides an agent-assisted and self-service payment solution (Payline) that facilitates secure telephone order transactions. The Payline solution allows contact center customers to submit account data directly to SequenceShift's secure environment for payment processing by their preferred payment gateway. This ensures that cardholder data is never exposed to contact center agent, thereby reducing the risk of any unauthorized use. Payline integrates with both traditional telephony solutions as well as cloud-based contact center services such as Amazon Connect. SequenceShift also provides a Secure Payments IVR, hosted payment iFrames and a pull gateway service for transmitting encrypted cardholder data to customer systems. A secure API for inbound transaction processing is also provided.



Describe how the business is otherwise involved in or has the ability to impact the security of its customers' account data.	SequenceShift does not provide other services that could impact the security of cardholder data.
Describe system components that could impact the security of account data.	The SequenceShift CDE is hosted on AWS cloud infrastructure. The CDE network consists of AWS VPCs containing EC2 instances, Lambda functions, RDS databases, Redis data stores, internet gateways, NAT gateways and load balancers.

**Part 2c. Description of Payment Card Environment**

<p>Provide a high-level description of the environment covered by this Assessment.</p> <p><i>For example:</i></p> <ul style="list-style-type: none"> <li>• <i>Connections into and out of the cardholder data environment (CDE).</i></li> <li>• <i>Critical system components within the CDE, such as POI devices, databases, web servers, etc., and any other necessary payment components, as applicable.</i></li> <li>• <i>System components that could impact the security of account data.</i></li> </ul>	<p>The AWS environment providing SequenceShift CDE hosting services and associated connectivity to customers and external payment gateways for inbound and outbound cardholder data transmission. This environment includes EC2 instances, Lambda functions, RDS databases, Redis data stores, internet gateways, NAT gateways and load balancers.</p>
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Indicate whether the environment includes segmentation to reduce the scope of the Assessment. (Refer to the "Segmentation" section of PCI DSS for guidance on segmentation)  Yes  No

**Part 2d. In-Scope Locations/Facilities (ROC Section 4.6)**

List all types of physical locations/facilities (for example, corporate offices, data centers, call centers and mail rooms) in scope for this Assessment.

Facility Type	Total Number of Locations (How many locations of this type are in scope)	Location(s) of Facility (city, country)
<i>Example: Data centers</i>	3	<i>Boston, MA, USA</i>
Head Office	1	Sydney, Australia





**Part 2e. PCI SSC Validated Products and Solutions  
(ROC Section 3.3)**

Does the entity use any item identified on any PCI SSC Lists of Validated Products and Solutions\*?

Yes  No

Provide the following information regarding each item the entity uses from PCI SSC's Lists of Validated Products and Solutions:

Name of PCI SSC-validated Product or Solution	Version of Product or Solution	PCI SSC Standard to which Product or Solution Was Validated	PCI SSC Listing Reference Number	Expiry Date of Listing

\* For purposes of this document, "Lists of Validated Products and Solutions" means the lists of validated products, solutions, and/or components, appearing on the PCI SSC website ([www.pcisecuritystandards.org](http://www.pcisecuritystandards.org)) (for example, 3DS Software Development Kits, Approved PTS Devices, Validated Payment Software, Payment Applications (PA-DSS), Point to Point Encryption (P2PE) solutions, Software-Based PIN Entry on COTS (SPoC) solutions, and Contactless Payments on COTS (CPoC) solutions).





**Part 2f. Third-Party Service Providers**  
**(ROC Section 4.4)**

For the services being validated, does the entity have relationships with one or more third-party service providers that:

- Store, process, or transmit account data on the entity’s behalf (for example, payment gateways, payment processors, payment service providers (PSPs, and off-site storage))  Yes  No
- Manage system components included in the entity’s Assessment (for example, via network security control services, anti-malware services, security incident and event management (SIEM), contact and call centers, web-hosting companies, and IaaS, PaaS, SaaS, and FaaS cloud providers)  Yes  No
- Could impact the security of the entity’s CDE (for example, vendors providing support via remote access, and/or bespoke software developers).  Yes  No

**If Yes:**

Name of Service Provider:	Description of Services Provided:
Amazon Web Services	Infrastructure as a Service
Payment Gateways (identified in ROC)	Payment Processing

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



**Part 2g. Summary of Assessment**  
**(ROC Section 1.8.1)**

Indicate below all responses provided within each principal PCI DSS requirement.

PCI DSS Requirement	Requirement Finding More than one response may be selected for a given requirement. Indicate all responses that apply.					Select If Below Method(s) Was Used	
	In Place	In Place with Remediation	Not Applicable	Not Tested	Not in Place	Customized Approach	Compensating Controls
Requirement 1:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 2:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 3:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 4:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 5:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 6:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 7:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 8:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 9:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 10:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 11:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Requirement 12:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appendix A1:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appendix A2:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## Section 2 Report on Compliance

(ROC Sections 1.2 and 1.3.2)

Date Assessment began: <i>Note: This is the first date that evidence was gathered, or observations were made.</i>	2023-05-02
Date Assessment ended: <i>Note: This is the last date that evidence was gathered, or observations were made.</i>	2023-06-05
Were any requirements in the ROC unable to be met due to a legal constraint?  Were any testing activities performed remotely? If yes, for each testing activity below, indicate whether remote assessment activities were performed: <ul style="list-style-type: none"> <li>• Examine documentation <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</li> <li>• Interview personnel <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</li> <li>• Examine/observe live data <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</li> <li>• Observe process being performed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</li> <li>• Observe physical environment <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</li> <li>• Interactive testing <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</li> <li>• Other:</li> </ul>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



## Section 3 Validation and Attestation Details

### Part 3. PCI DSS Validation (ROC Section 1.7)

This AOC is based on results noted in the ROC dated *(Date of Report as noted in the ROC 2023-06-30)*.

Indicate below whether a full or partial PCI DSS assessment was completed:

- Full Assessment** – All requirements have been assessed and therefore no requirements were marked as Not Tested in the ROC.
- Partial Assessment** – One or more requirements have not been assessed and were therefore marked as Not Tested in the ROC. Any requirement not assessed is noted as Not Tested in Part 2g above.

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

<input checked="" type="checkbox"/>	<p><b>Compliant:</b> All sections of the PCI DSS ROC are complete, and all assessed requirements are marked as being either 1) In Place, 2) In Place with Remediation, or 3) Not Applicable, resulting in an overall <b>COMPLIANT</b> rating; thereby SequenceShift Operations Pty Ltd has demonstrated compliance with all PCI DSS requirements except those noted as Not Tested above.</p>						
<input type="checkbox"/>	<p><b>Non-Compliant:</b> Not all sections of the PCI DSS ROC are complete, or one or more requirements are marked as Not in Place, resulting in an overall <b>NON-COMPLIANT</b> rating; thereby <i>(Service Provider Company Name)</i> has not demonstrated compliance with PCI DSS requirements.</p> <p><b>Target Date</b> for Compliance: YYYY-MM-DD</p> <p>An entity submitting this form with a Non-Compliant status may be required to complete the Action Plan in Part 4 of this document. Confirm with the entity to which this AOC will be submitted before completing Part 4.</p>						
<input type="checkbox"/>	<p><b>Compliant but with Legal exception:</b> One or more assessed requirements in the ROC are marked as Not in Place due to a legal restriction that prevents the requirement from being met and all other assessed requirements are marked as being either 1) In Place, 2) In Place with Remediation, or 3) Not Applicable, resulting in an overall <b>COMPLIANT BUT WITH LEGAL EXCEPTION</b> rating; thereby <i>(Service Provider Company Name)</i> has demonstrated compliance with all PCI DSS requirements except those noted as Not Tested above or as Not in Place due to a legal restriction.</p> <p>This option requires additional review from the entity to which this AOC will be submitted.</p> <p><i>If selected, 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 from 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 from being met				
Affected Requirement	Details of how legal constraint prevents requirement from being met						





### Part 3a. Service Provider Acknowledgement

#### Signatory(s) confirms:





(Select all that apply)

<input checked="" type="checkbox"/>	The ROC was completed according to <i>PCI DSS</i> , Version 4.0 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 the Assessment in all material respects.
<input checked="" type="checkbox"/>	PCI DSS controls will be maintained at all times, as applicable to the entity's environment.

### Part 3b. Service Provider Attestation

DocuSigned by:  AD48B9786D4F432...	
Signature of Service Provider Executive Officer 	Date:
Service Provider Executive Officer Name: Dmitri Muntean	Title: Managing Director

### Part 3c. Qualified Security Assessor (QSA) Acknowledgement

If a QSA was involved or assisted with this Assessment, indicate the role performed:	<input checked="" type="checkbox"/> QSA performed testing procedures.
	<input type="checkbox"/> QSA provided other assistance. If selected, describe all role(s) performed:
DocuSigned by:  63EBE787EF934CB...	
Signature of Lead QSA 	Date: June 30, 2023   20:58 AEST
Lead QSA Name: Gareth Batchelor	
DocuSigned by:  63EBE787EF934CB...	
Signature of Duly Authorized Officer of QSA Company 	Date: June 30, 2023   20:58 AEST
Duly Authorized Officer Name: Gareth Batchelor	QSA Company: Cloudtrace Pty Ltd

### Part 3d. PCI SSC Internal Security Assessor (ISA) Involvement

If an ISA(s) was involved or assisted with this Assessment, indicate the role performed:	<input type="checkbox"/> ISA(s) performed testing procedures.
	<input type="checkbox"/> ISA(s) provided other assistance. If selected, describe all role(s) performed:



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

Only complete Part 4 upon request of the entity to which this AOC will be submitted, and only if the Assessment has Non-Compliant results noted in Section 3.

If asked to complete this section, select the appropriate response for "Compliant to PCI DSS Requirements" for each requirement below. For any "No" responses, include the date the entity expects to be compliant with the requirement and provide a brief description of the actions being taken to meet the requirement.

PCI DSS Requirement	Description of Requirement	Compliant to PCI DSS Requirements (Select One)		Remediation Date and Actions (If "NO" selected for any Requirement)
		YES	NO	
1	Install and maintain network security controls	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2	Apply secure configurations to all system components	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	Protect stored account data	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4	Protect cardholder data with strong cryptography during transmission over open, public networks	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5	Protect all systems and networks from malicious software	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
6	Develop and maintain secure systems and software	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7	Restrict access to system components and cardholder data by business need to know	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8	Identify users 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	Log and monitor all access to system components and cardholder data	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11	Test security systems and networks regularly	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
12	Support information security with organizational policies and programs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Appendix A1	Additional PCI DSS Requirements for Multi-Tenant Service Providers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Appendix A2	Additional PCI DSS Requirements for Entities using SSL/early TLS for Card-Present POS POI Terminal Connections	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

