<FIRST NAME><LAST NAME>
<ADDRESS>
<CITY><STATE><ZIP>

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<DATE>

## **Notice of Data Incident**

Dear <FIRST NAME><LAST NAME>,

We write to inform you of a recent data security incident ("Matter") that may concern some of your personal information (collectively the "Information"). We are sharing what we know about the Matter, our response to it, and steps you can take to help protect your Information.

## What Happened?

On or about May 9, 2023, we were notified that a third party may be in possession of your Information. We engaged an incident response team, worked with law enforcement, and continue to investigate the Matter. On or about June 6, 2023, our investigation revealed that some data, including your Information, may have been impacted, which is why we are notifying you. We are in communication with the American Board of Plastic Surgery, and we understand that the American Board of Plastic Surgery is also investigating with law enforcement other incidents similar to this Matter.

#### What Information Was Involved?

The Information that might be impacted includes:

- First and last name
- Social Security Number (if provided)
- Address
- Driver's license or identification card number
- Financial account or payment card number, in combination with any required CVV code
- Intake forms, which may include medical information and history
- Images taken in connection with the services rendered at our office
- Health insurance information (if provided)

## What Are We Doing?

Upon learning of the Matter, we engaged our incident response team, which began investigating the Matter, and took a number of risk mitigation steps. We engaged data security professional experts to assist in our investigation. Out of an abundance of caution, we disabled access to the computer system and took the system offline. We implemented various security measures. We will continue to conduct additional employee training and work closely with law enforcement. We also continue to provide information to the American Board of Plastic Surgery.

We are providing you with access to two (2) years of no cost Triple Bureau Credit Monitoring/Triple Bureau Credit Report/Triple Bureau Credit Score/Cyber Monitoring services. These services provide you with

alerts for twenty four (24) months from the date of enrollment when changes occur to any of one of your Experian, Equifax, or TransUnion credit files. This notification is sent to you the same day that the change or update takes place with the bureau. The monitoring services also include reviewing whether for your Information appears on the dark web and alert you if your Information is found online. In addition, we are providing you with proactive fraud assistance to help with any questions that you might have or in event that you become a victim of fraud. These services will be provided by <NAME> through Identity Force, a TransUnion company specializing in fraud assistance and remediation services.

## **How Do I Enroll For The No Cost Services?**

enroll Credit Monitoring services please To in at no charge, log on to <LINK> and follow the instructions provided. When prompted please provide the following unique code to receive services: <CODE>. To receive the monitoring services described above, you must enroll within ninety (90) days from the date of this letter. The enrollment requires an internet connection and e-mail account and may not be available to minors under the age of eighteen (18) years of age. Please note that when signing up for monitoring services, you may be asked to verify Information to confirm your identity.

### What Can You Do?

We encourage you to remain vigilant in reviewing your Information, such as reviewing your account statements, and monitor credit reports for any suspicious activity. We encourage you to enroll to receive Triple Bureau Credit Monitoring/Triple Bureau Credit Report/Triple Bureau Credit Score/Cyber Monitoring services. Please note that you must enroll directly. We are unable to enroll in these services for you.

## For More Information.

Representatives are available for ninety (90) days from the date of this letter, to assist you with questions regarding this matter, between the hours of 8:00 am to 8:00 pm Eastern time, Monday through Friday, excluding holidays. Please call the help line at <NUMBER> and supply the call representative with your unique code listed above.

While the call center representatives should be able to provide thorough assistance and answer most of your questions, you may still feel the need to speak with our office regarding this Matter. If so, please call 310-246-2355 from 9:00 am to 5:00 pm Pacific time, Monday through Friday.

We apologize for any inconvenience this may have caused.

Sincerely,

Dr. Gary Motykie on behalf of Gary Motykie, M.D., a Medical Corporation 9201 W Sunset Blvd 1A West Hollywood, CA 90069