

## **Client Information Sheet**

**HSS Partner: svsv** 

**Client Name: sdvasb** 

**Street Address: dsvas** 

Street Address 2 : sdva

City: svas

Province: vaa

**Zip Code: 35801** 

Contact : fsavg

Phone: 111-111-1111

Email:egxeb@d.com

**Covered Entity: agvasg** 

**Covered Entity Street Address: dgsfd** 

Covered Entity Street Address 2 : gasga					
Covered Entity City : sgas					
Covered Entity State : asgs					
Covered Entity Zip Code : 35801					
Information security officer :					
ISO Title:					
ISO Email :					
ISO Telephone :					
IT Network Name :					
Risk assessment report date :					
Unique Project Identifier (UPI) :					
Type of IT system :					
System categorization :					
System status :					
System configuration :					

Database :
Network server OS:
How many Servers :
How many Workstations :
How many laptops/tablets :
How many BYODs do you have :
What operating systems are in use:
Email:
Do you use Email?
What Product(s) do you use?
Do you have an in-house email server?
Firwall:
Firewall Model :
Firewall S/N :
Firewall warranty status :

	ound/outbou	nd Rule 1 :					
Firewall inbe	ound/outbou	nd Rule 2 :					
Firewall inbe	ound/outbou	nd Rule 3 :					
Any VPN's (	define) :						
EMR:							
What is the name of EMR :							
Is the EMR hosted or running in-house :							
Information Contacts:							
0	Contact	Contact Title	Contact Phone	Contact Email	Contact ParticipateIn		
Contact Company	Name						
	Name gvfh	ghdvh	111-111-1111	cd@chb.com	bdch		
Company		ghdvh hjcsv	111-111-1111 111-111-2222	cd@chb.com hcsvb@bc.com	bdch shdjbc		
Company ggds hbFDJHV	gvfh	hjcsv					

Support contract number :

Connection type :						
Static IP info :						
Network IP :						
Network Subnet :						
Network gateway :						
Network DNS1 :						
Network DNS2 :						
Interfaces:						
Interface Name	Interface Contact Number	interface_connection_type				
dfvfav	111-111-1111	sdvadvd				
mahhek	222-222-2222	khan				
Clearinghouse :						

Clearing house:

contact number :

Interface connection type:

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