



State of Alaska

Cyber Incident Reporting Procedure
Call 907-269-5000



Please have the following information available prior to your call:

- Agency Name
- Point of Contact
 - Name
 - Telephone/Pager/Cell
 - Email address
- Characteristics of Incident
- How the Incident was Identified
- Date and Time Incident was Detected
- Scope of Impact
- Name of Incident
 - Denial of Service
 - Malicious Code
 - Recon and scams
 - Unauthorized access
 - Other
- What immediate assistance can the Security Office offer your agency?