**Cyber Security Incident Recovery**

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# Incident Name:

## Name of persons performing forensics on systems:

## Was the root cause identified? YES NO

Describe:

# Steps performed for system recovery:

Incident Containment Form by: Date and Time of Form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_