Exhibit B - ASSURANCES & CERTIFICATIONS
Port Gamble S'Klallam Tribe & State of Washington, Department of Social & Health Services

Indian Nation Program Agreement: 1462-22804

Data Share Agreement - ACES & SEMS Web

1. All Child Support and TANF program employees or contracted staff members comply with the data security provisions of the Data Share Agreement (DSA).
2. Our Tribe has policies in place to ensure confidentiality of ACES and SEMS (including, but not limited to Employment Security Department) data.
3. SEMS Access: All Child Support & TANF program employees or contracted staff members with access to SEMS (including, but not limited to ESD) records and information, whether direct or indirect, have annually signed the DSHS Form 9-989 (Confidentiality Statement – Tribal Employee) (Exhibit D), with a copy kept on file by the Tribe. Staff with direct access must also annually electronically acknowledge this agreement.
4. ACES Access: All Child Support & TANF program employees or contracted staff members with access to DSHS and/or ESD records & information, whether direct or indirect, have annually reviewed and signed the Washington State Department of Social and Health Services, Notice of Nondisclosure form (Exhibit C) with a copy kept on file by the Tribe.
5. Software Security Tokens (SST): Each of the SSTs provided by DSHS to the Tribe are assigned to only one (1) individual and access and use of the SSTs are not shared between program employees or contracted staff.

TANF Program

- Please identify the two (2) individuals with direct access to the ACES, SEMS & ESD databases through use of the two (2) Software Security Tokens provided by DSHS to the TANF program.

  1. _____

  2. _____

Child Support Program

- Please identify the two (2) individuals with direct access to the ACES, SEMS & ESD databases through use of the two (2) Software Security Tokens provided by DSHS to the Child Support program.

  1. Maria Huynh

  2. Lena Tunkara

TANF PROGRAM	**CHILD SUPPORT PROGRAM**
☐ By checking this box, I agree as the Tribe's Security Monitor for the TANF Program, that the Tribe is in compliance with the certification contained herein.*	■ By checking this box, I agree as the Tribe's Security Monitor for the Child Support Program, that the Tribe is in compliance with the certification contained herein.*
Security Monitor **Date**	**Security Monitor** **Date** 9-8-16
***The Security Monitor for the TANF & Child Support programs may be the same person**	