

Attachment 3
US OPM, OFFICE OF THE INSPECTOR GENERAL, OFFICE OF AUDITS
MEDIA SPECIFICATIONS FORM

Insurance Company & Plan: _____

File Name: _____
(maximum 31 character name)

File Format:

- ___ Microsoft Access
- ___ Microsoft Excel
- ___ Tab-delimited Text
- ___ Other, describe _____

Data Compression/Encryption:

- ___ WinZip, encryption and compression, Version 9.0
- ___ Other, explain _____

Media Type & Recording Format:

- ___ CD
- ___ DVD
- ___ USB Memory Stick
- ___ Other, please describe:

Record Size:	Record Count:	Amount Control Total:
_____	_____	<u>\$</u> _____

Signature: _____ **Phone:** _____ **Date:** _____