



## Visa PIN Attestation of Compliance

This form is used by the Security Assessor ("SA") as an attestation of the Program Participant's compliance status with the applicable Visa security requirements.

The SA must complete and submit the form to Visa on or before the program participant's validation date to ensure the Global Registry of Service Providers accurately reflects the participant's correct compliance status.

| Section 1a: Assessed Program Participant Information |                         |                          |                                |
|--|-------------------------|--------------------------|--------------------------------|
| Entity Name:   | Payten DOOEL Skopje     | DBA (doing business as): |                                |
| Business ID:   |                         | Email:                   | aleksandar.dimovski@payten.com |
| Contact Name:  | Aleksandar Dimovski     | Title:                   | POS-Technician                 |
| Telephone:   | + 3892 3248000 ext 2970 | Country:                 | Macedonia                      |
| State/Province:                                      | Skopje                  | Zip/Post Code:           | 1000                           |

| Section 1b: Visa Approved PIN Security Assessor Information |                         |                |                            |
|---|-------------------------|----------------|----------------------------|
| Company Name:   | Compliance Control Ltd. |                |                            |
| SA Name:  | Ivan Tverdokhlebov      | Title:         | Chief Executive Officer    |
| Telephone:  | +7 926 576-7095         | Email:         | ivan@compliance-control.ru |
| State/Province:   | Moscow                  | Country:       | Russia                     |
|   |                         | Zip/Post Code: | 119119                     |

| Section 2: Onsite Assessment Information  |  |
|---|--|
| Security requirements used:   | <input checked="" type="checkbox"/> PCI PIN Security Requirements (v2.0) |
| The undersigned PIN SA conducted an onsite assessment of the following programs and services: |  |
| <input type="checkbox"/> PIN Acquirer Payment Processing - POS                                |  |
| <input type="checkbox"/> PIN Acquirer Payment Processing - ATM                                |  |
| <input checked="" type="checkbox"/> Encryption Support Organization/Key Injection Facilities  |  |
| <input type="checkbox"/> Encryption Support Organization/Remote Key Distribution              |  |
| <input type="checkbox"/> Certification and Registration Authority                             |  |



| Facility/Location(s) Assessed | Date Visited                             |           |
|-------------------------------|--|-----------|
|                               | Naroden Front 17, 1000 Skopje, Macedonia | 12/7/2018 |
|                               | Start date                               | End date  |
|                               | Start date                               | End date  |
|                               | Start date                               | End date  |
|                               | Start date                               | End date  |
|                               | Start date                               | End date  |
|                               | Start date                               | End date  |
|                               | Start date                               | End date  |


### Section 3: Compliance Validation and Security Assessor Acknowledgement

Based on the onsite assessment, the undersigned SA attests that the assessed company has achieved its full compliance status. All applicable requirements noted within section 2 were confirmed during the onsite assessment or have been remediated since the onsite assessment. The SA attests that this report is complete and accurate to the best of his/her knowledge and accurately reflects the onsite assessment conducted by him/her.

|            |   |                           |                   |
|------------|---|---------------------------|-------------------|
| SA Name:   | Ivan Tverdokhlebov  | Date Compliance Achieved: | December 21, 2018 |
| Signature: |  | Sign date:                | December 24, 2018 |

### Section 4: Assessed Program Participant Acknowledgement

By signature of its authorized representative below, the Program Participant confirms this VAOC is complete and accurate to the best of its knowledge and accurately reflects the Program Participant's compliant status. The Program Participant has read the applicable requirements noted within section 2 and understands that it must maintain full compliance at all times.

|                         |   |            |                   |
|-------------------------|---|------------|-------------------|
| Executive Officer Name: | Jordan Kanturski  | Title:     | Manager           |
| Signature:              |  | Sign date: | December 24, 2018 |