



Federal Communications Commission  
Authorization and Evaluation Division  
7435 Oakland Mills Road  
Columbia, MD 21046  
USA

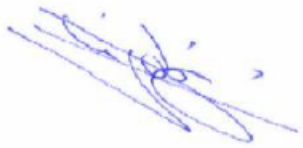
Date: April 28, 2025

**Ref:** Attestation Statements Part 2.911(d)(5)(i) Filing  
**FCC ID:** ZBW-MASIGMA13M

**IDEMIA PUBLIC SECURITY France** ("the applicant") certifies that the equipment for which authorization is sought **is not** "covered" equipment prohibited from receiving an equipment authorization pursuant to section 2.903 of the FCC rules.

Link: [List of Equipment and Services Covered By Section 2 of The Secure Networks Act](#)

Sincerely,

|                                      |                                                                                     |
|--------------------------------------|-------------------------------------------------------------------------------------|
| <b>IDEMIA PUBLIC SECURITY France</b> |                                                                                     |
| <b>Mickael ROBIC</b>                 |                                                                                     |
| Signature:                           |  |



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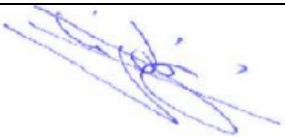
Date: April 28, 2025

**Ref:** Attestation Statements Part 2.911(d)(5)(ii) Filing  
**FCC ID:** ZBW-MASIGMA13M

**IDEMIA PUBLIC SECURITY France** (“the applicant”) certifies that, as of the date of the filing of the application, the applicant **is not** identified on the Covered List (as a specifically named entity or any of its subsidiaries or affiliates) as an entity producing “covered” equipment.

Link: [List of Equipment and Services Covered By Section 2 of The Secure Networks Act](#)

Sincerely,

|                                                                                                |
|------------------------------------------------------------------------------------------------|
| <b>IDEMIA PUBLIC SECURITY France</b>                                                           |
| <b>Mickael ROBIC</b>                                                                           |
| Signature:  |