

# Microsoft Licensing, GP Document Summary Form

*\* This is for informational purposes only \**

**MSE#:**

(MSLI  
Tracking  
Number)

**3-0000009076682**

**Doc Type:**

**Signature Form**

*Do not modify the formatting or spacing of this Form above this text*

**Subsidiary:**

**Country:**

**United States**

**Account Manager Name / Alias:**

**LAR/LAD/ESA:**

**Program/Version**

**SLG 2015**



(MSLI Scanning Code)

**ACCOUNT: County of Riverside**

3

Outsourcer Name:

Business Agreement Number:

Master Agreement Number: **01E73970**

Agreement Number:

Purchase Order Number:

**Comments:**



## Volume Licensing

### Program Signature Form

MBA/MBSA number

Agreement number

|          |
|----------|
|          |
| 01E73970 |

CAMSTR-051116

**Note:** Enter the applicable active numbers associated with the documents below. Microsoft requires the associated active number be indicated here, or listed below as new.

For the purposes of this form, "Customer" can mean the signing entity, Enrolled Affiliate, Government Partner, Institution, or other party entering into a volume licensing program agreement.

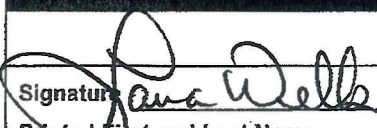
This signature form and all contract documents identified in the table below are entered into between the Customer and the Microsoft Affiliate signing, as of the effective date identified below.

| Contract Document                | Number or Code |
|----------------------------------|----------------|
| Enterprise Agreement             | X20-12056      |
| <Choose Agreement>               |                |
| <Choose Agreement>               |                |
| <Choose Agreement>               |                |
| <Choose Agreement>               |                |
| <Choose Enrollment/Registration> |                |
| <Choose Enrollment/Registration> |                |
| <Choose Enrollment/Registration> |                |
| <Choose Enrollment/Registration> |                |
| <Choose Enrollment/Registration> |                |
| Amendment to Contract Documents  | CCTM / NEW     |
|                                  |                |
|                                  |                |
|                                  |                |

By signing below, Customer and the Microsoft Affiliate agree that both parties (1) have received, read and understand the above contract documents, including any websites or documents incorporated by reference and any amendments and (2) agree to be bound by the terms of all such documents.

| Customer                                                        |
|-----------------------------------------------------------------|
| Name of Entity (must be legal entity name)* County of Riverside |
| Signature* <i>Melissa Etter</i>                                 |
| Printed First and Last Name* Melissa Etter                      |
| Printed Title Procurement Contract Specialist                   |
| Signature Date* 8/17/2014                                       |
| Tax ID                                                          |

\* indicates required field

| Microsoft Affiliate                                                                         |                                                                                                                                                                                                                                                |
|---------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Microsoft Corporation                                                                       |                                                                                                                                                                                                                                                |
| Signature  |  <b>Microsoft</b><br><b>Microsoft Corporation</b><br><b>AUG 18 2016</b><br><b>Laura Wells</b><br>Duly Authorized on behalf of<br><b>Microsoft Corporation</b> |
| Printed First and Last Name                                                                 |                                                                                                                                                                                                                                                |
| Printed Title                                                                               |                                                                                                                                                                                                                                                |
| Signature Date<br>(date Microsoft Affiliate countersigns)                                   |                                                                                                                                                                                                                                                |
| Agreement Effective Date<br>(may be different than Microsoft's signature date)              | 11/01/16                                                                                                                                                                                                                                       |

Optional 2<sup>nd</sup> Customer signature or Outsourcer signature (if applicable)

| Customer                                    |
|---------------------------------------------|
| Name of Entity (must be legal entity name)* |
| Signature* _____                            |
| Printed First and Last Name*                |
| Printed Title                               |
| Signature Date*                             |

\* Indicates required field

| Outsourcer                                  |
|---------------------------------------------|
| Name of Entity (must be legal entity name)* |
| Signature* _____                            |
| Printed First and Last Name*                |
| Printed Title                               |
| Signature Date*                             |

\* Indicates required field

If Customer requires physical media, additional contacts, or is reporting multiple previous Enrollments, include the appropriate form(s) with this signature form.

After this signature form is signed by the Customer, send it and the Contract Documents to Customer's channel partner or Microsoft account manager, who must submit them to the following address. When the signature form is fully executed by Microsoft, Customer will receive a confirmation copy.

**Microsoft Corporation**  
 Dept. 551, Volume Licensing  
 6100 Neil Road, Suite 210  
 Reno, Nevada 89511-1137  
 USA