Microsoft Licensing, GP Document Summary Form

* This is for informational purposes only *

MSE#:

3-0000009076682

(MSLI Tracking Number)

Doc Type:

Signature Form

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

Subsidiary:

Account Manager Name / Alias:

Country:

United States

LAR/LAD/ESA:

Program/Version

SLG 2015



(MSLI Scanning Code)

ACCOUNT: County of Riverside

Outsourcer Name:

Business Agreement Number:

Master Agreement Number:

01E73970

Agreement Number:

Purchase Order Number:

Comments:



Volume Licensing

Program Signature Form

MBA/MBSA number O1E 73970

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>	
<choose enrollment="" registration=""></choose>	
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* Muliona Thos		
Printed First and Last Name* Melissa Etter		
Printed First and Last Name* Melissa Etter Printed Title Procurement Contract Specialist		
Signature Date* 8/17/20/CP		
Tax ID		

^{*} indicates required field

Mi	crosoft Affiliate	
Mic,	rosoft Corporation	
Signatur ava Wells	Microsoft	
Printed First and Last Name	Microsoft Corporation	
Printed Title Signature Date (date Microsoft Affiliate countersigns)	AUG 1 8 2016	
Agreement Effective Date (may be different than Microsoft's signature date)	Laura Wells Duly Authorized on behalf of Microsoft Corporation	11/01/11

Optional 2nd 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*			

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

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

^{*} indicates required field

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