

Program Signature Form

MBA/MBSA number

Agreement number

01H37040

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
<Choose Agreement>	Document Number or Code
<Choose Agreement>	Document Number or Code
<Choose Agreement>	Document Number or Code
<Choose Agreement>	Document Number or Code
<Choose Agreement>	Document Number or Code
<Choose Enrollment/Registration>	Document Number or Code
<Choose Enrollment/Registration>	Document Number or Code
<Choose Enrollment/Registration>	Document Number or Code
<Choose Enrollment/Registration>	Document Number or Code
School Enrollment	X20-11473

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)*	San Bernardino County Preschool
Signature*	_____
Printed First and Last Name*	Dawn Rowe
Printed Title	Chair, Board of Supervisors
Signature Date*	
Tax ID	

* indicates required field

Microsoft Affiliate	
Microsoft Corporation	
Signature <u>Richard Lindgren</u>	
Printed First and Last Name	
Printed Title	
Signature Date (date Microsoft Affiliate countersigns)	JAN 26 2024
Agreement Effective Date (may be different than Microsoft's signature date)	Richard Lindgren Authorized on behalf of Microsoft Corporation

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*	_____

* 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 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
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 Reno, Nevada 89511
 USA