

## Program Signature Form

MBA/MBSA number

Agreement number E3803392

5-0000008955825

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	X20-10210	
Interprise Enrollment (Indirect)	X20-10635	
Product Selection Form	1221159.009 PSF	
Enterprise Amendment	M97 M130 (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 of Signature* Rogu S.	entity name)* City of Grand Island	
Printed First and Jast Name*		
Printed Title	Mayor	
Signature Date*	September 1,2022	
Tax ID		

Microsoft Affiliate	
Microsoft Corporation	
Signature Anthony Dulaney (Aug 11, 2022 12:26 PDT)	
Printed First and Last Name Anthony Dulaney	
Printed Title Authorized Signer	
Signature Date 8/11/2022 (date Microsoft Affiliate countersigns)	
Agreement Effective Date (may be different than Microsoft's signature date)	

<sup>\*</sup> indicates required field

## 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* Stock R. Work of
Printed Title Assistant City Attorney Signature Date* 911000
Signature Date* 9 112

	Outsourcer	
Name of Entity (must be le	gal entity name)*	
Signature*		
Printed First and Last Nan	ne*	
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 6880 Sierra Center Parkway Reno, Nevada 89511 USA

<sup>\*</sup> indicates required field

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