

Program Signature Form

MBA/MBSA number		Proposal ID
Agreement number	7756479	

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 Affillate, 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=""></choose>	Document Number or Code
<choose agreement=""></choose>	Document Number or Code
<choose agreement=""></choose>	Document Number or Code
<choose agreement=""></choose>	Document Number or Code
<choose agreement=""></choose>	Document Number or Code
Select Plus Affiliate Registration Form	X20-11591
<choose enrollment="" registration=""></choose>	Document Number or Code
<choose enrollment="" registration=""></choose>	Document Number or Code
<choose enrollment="" registration=""></choose>	Document Number or Code
<choose enrollment="" registration=""></choose>	Document Number or Code
Document Description	Document Number or Code
Document Description	Document Number or Code
Document Description	Document Number or Code
Document Description	Document Number or Code
Document Description	Document Number or Code

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)* City of Redlands	
Signature*	
Printed First and Last Name* Pete Aguilar	
Printed Title Mayor, City of Redlands	
Signature Date* 8/19/2014	
Tax ID	
* indicates required field	333
Microsoft Affiliate	
Microsoft Licensing, GP	
Signature	
Printed First and Last Name	
Printed Title	
Signature Date	
(date Microsoft Affiliate countersigns)	
Agreement Effective Date	
(may be different than Microsoft's signature date)	
Optional 2 nd Customer signature or Outsourcer signature (if applicable)	
Customer	
Name of Entity (must be legal entity name)*	
Signature*	2,6
Printed First and Last Name* PETE AGULAR ATTEST:	,
Printed Title MAYOR, CITY OF REDUANDS	le
Signature Date* 8/19/14 Jeanne Donaldson,	1
indicates required field Deputy City Clerk	Δ,
Outsourcer	e 1411 (1418)
Name of Entity (must be legal entity name)*	(1)111111111111111111111111111111111111
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

^{*} indicates required field

address. When the signature form is fully executed by Microsoft, Customer will receive a confirmation copy.

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