

Program Signature Form

MBA/MBSA number	
Agreement number	8084445

5-0000008396352

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=""></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
Enterprise Enrollment	X20-10635
<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
Amendment	M97 (New)
Product Selection Form	1178892.004
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 Chula Vista
Signature*
Printed First and Last Name*
Printed Title
Signature Date*
Tax ID

^{*} indicates required field

Microsoft Affiliate		
Microsoft Corporation		
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 2nd Customer signature or Outsourcer signature (if applicable)

Customer		
Name of Entity (must be legal entity name)*		
Signature*	1000	
Printed First and Last Name*		
Printed Title		
Signature Date*		

Outsourcer		
Name of Entity (must be legal entity name)*	A VALUE	
Signature*	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Printed First and Last Name*		
Printed Title		
Signature Date*		
* indicates required field		

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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

^{*} indicates required field

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