EXHIBIT "E"

GENERAL OFFER OF PRIVACY TERMS

1. Offer of Terms

Provider offers the same privacy protections found in this DPA between it and Santa Rosa City Schools ("Originating LEA") which is dated January 11, 2024, to any other LEA ("Subscribing LEA") who accepts this General Offer of Privacy Terms ("General Offer") through its signature below. This General Offer shall extend only to privacy protections, and Provider's signature shall not necessarily bind Provider to other terms, such as price, term, or schedule of services, or to any other provision not addressed in this DPA. The Provider and the Subscribing LEA may also agree to change the data provided by Subscribing LEA to the Provider to suit the unique needs of the Subscribing LEA. The Provider may withdraw the General Offer in the event of: (1) a material change in the applicable privacy statues; (2) a material change in the services and products listed in the originating Service Agreement; or three (3) years after the date of Provider's signature to this Form. Subscribing LEAs should send the signed **Exhibit "E"** to Provider at the following email address:

PROVIDER EXHIBIT E NOTIFICATION EMAIL ADDRESS

PROVIDER: Stats Medic

BY: Luke Wilcox Date: 2/3/24

Printed Name: Luke Wilcox Title/Position: Co Founder

2. Subscribing LEA

A Subscribing LEA, by signing a separate Service Agreement with Provider, and by its signature below, accepts the General Offer of Privacy Terms. The Subscribing LEA and the Provider shall therefore be bound by the same terms of this DPA for the term of the DPA between the Santa Rosa City Schools and the Provider. **PRIOR TO ITS EFFECTIVENESS, SUBSCRIBING LEA MUST DELIVER NOTICE OF ACCEPTANCE TO PROVIDER PURSUANT TO ARTICLE VII, SECTION 5. **

LEA: INSERT SUBSCRIBING SCHOOL DISTRICT OR LOCAL EDUCATION AGENCY

BY:

Date: SUBSCRIBING LEA SIGN DATE

Printed Name: SUBSCRIBING LEA AUTHORIZED SIGNER PRINT NAME Title/Position: SUBSCRIBING LEA AUTHORIZED SIGNER TITLE

SCHOOL DISTRICT NAME: INSERT SUBSCRIBING SCHOOL DISTRICT OR LOCAL EDUCATION AGENCY

DESIGNATED REPRESENTATIVE OF LEA:

Name: DESIGNATED REPRESENTATIVE OF SUBSCRIBING LEA NAME

Title: DESIGNATED REPRESENTATIVE OF SUBSCRIBING LEA TITLE

Address: DESIGNATED REPRESENTATIVE OF SUBSCRIBING LEA ADDRESS

Telephone Number: DESIGNATED REPRESENTATIVE OF SUBSCRIBING LEA PHONE NUMBER

Email: DESIGNATED REPRESENTATIVE OF SUBSCRIBING LEA EMAIL