<u>EXHIBIT "E"</u> GENERAL OFFER OF PRIVACY TERMS

1. Offer of Terms

("Originating LEA") which is dated Offer of Privacy Terms ("General Offer") t privacy protections, and Provider's signatu term, or schedule of services, or to any Subscribing LEA may also agree to chang unique needs of the Subscribing LEA. The material change in the applicable privacy s	ns found in this DPA between it and Eastern Illinois Area of Special Education, to any other LEA ("Subscribing LEA") who accepts this General through its signature below. This General Offer shall extend only to use shall not necessarily bind Provider to other terms, such as price other provision not addressed in this DPA. The Provider and the e the data provided by Subscribing LEA to the Provider to suit the e Provider may withdraw the General Offer in the event of: (1) a statues; (2) a material change in the services and products listed in the eight (3) years after the date of Provider's signature to this Form send the signed Exhibit "E
to Provider at the following email a	ddress: information@starautismsupport.com
PROVIDER: STAR Autism Support BY:	Date: 06/11/2021
Printed Name: Jesse Arick	Title/Position: CEO

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 Eastern Illinois Area of Special Education and STAR Autism Support

**PRIOR TO ITS EFFECTIVENESS, SUBSCRIBING LEA MUST DELIVER NOTICE OF ACCEPTANCE TO PROVIDER PURSUANT TO ARTICLE VII, SECTION 5. **

Subscribing LFA: AAA . . .

By: <u>Rona Henne</u> Date: <u>2022-06-23</u>

Printed Name: Rona Henne Title: Assistive Technology Specialist

SCHOOL DISTRICT NAME: Mid-Valley Special Education Coop

DESIGNATED REPRESENTATIVE OF LEA:

Name: Rona Henne

Title: Assistive Technology Specialist

Address:

Phone: 3312285993

Email: rona.henne@d303.org