EXHIBIT "E"

GENERAL OFFER OF TERMS

1. OFFER OF TERMS

Provider Name: Securly
BY: michaelann Carlin g8393AB978E243ABB8E8B4A2958E61EE readysign
Date: 06/29/2023
Printed Name: Michaelann Carlin
Title/Position: Director of Revenue Operatoins

By: <u>Bill Nimmons</u> Date: <u>2023-10-30</u>

Printed Name: Bill Nimmons Title/Position: IT Director

SCHOOL DISTRICT NAME: Leon County Schools

DESIGNATED REPRESENTATIVE OF LEA

Name: Bill Nimmons
Title: IT Director

Address: 520 S. Appleyard Dr Tallahassee, FL

Telephone Number: <u>850-487-7530</u> Email: <u>nimmonsw@leonschools.net</u>

COUNTY OF LEA: Florida