EXHIBIT "E" GENERAL OFFER OF PRIVACY TERMS

1. Offer of Terms	Timeral Tueletin Calcael Die
Provider offers the same privacy protections found in this DPA betw	ween it and [11gard-1ualatin School Dis
("Originating LEA") which is dated $[11/15/2023]$, to any other	r LEA ("Subscribing LEA") who accepts this
General Offer of Privacy Terms ("General Offer") through its signature	e 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 i	in the event of: (1) a material change in the
applicable privacy statues; (2) a material change in the services an	nd 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:
sales@quill.org	
Empirical Resolution Inc.	
7776000	11/15/0000
BY:	Date:11/15/2023
-	

2. Subscribing LEA

Printed Name: Ellie Dean

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 [Tigard-Tualatin School Dig and the Provider. **PRIOR TO ITS EFFECTIVENESS, SUBSCRIBING LEA MUST DELIVER NOTICE OF ACCEPTANCE TO PROVIDER PURSUANT TO ARTICLE VII, SECTION 5. **

_Title/Position: Finance &Operations Manager

By: Leslie Roache Date: <u>2023-12-19</u>

Printed Name: Leslie Roache Title: Director of Teaching & Director of Teaching & Director of Teaching & Title: Director of Teaching & Dir

SCHOOL DISTRICT NAME: <u>Silver Falls School District 4J</u>
DESIGNATED REPRESENTATIVE OF LEA:

Name: <u>Brett Milliken</u> Title: <u>Director of IT</u>

Address: 612 Schlador Street

Phone: (503) 873-6331

Email: milliken_brett@silverfalls.k12.or.us