## EXHIBIT "E" GENERAL OFFER OF PRIVACY TERMS

## 1. Offer of Terms

Provider offers the same privacy protections for	ound in this DPA between it	and Sycamore	CUSD 427	
("Originating LEA") which is dated	, to any other LEA ("Subsc	ribing LEA") who	accepts this G	eneral
Offer of Privacy Terms ("General Offer") thro	ough its signature below. T	nis General Offer	shall extend o	nly to
privacy protections, and Provider's signature	shall not necessarily bind F	rovider to other	terms, such as	price,
term, or schedule of services, or to any otl	her provision not addresse	d in this DPA. T	he Provider an	id the
Subscribing LEA may also agree to change the	he data provided by Subsc	ribing LEA to the	Provider to su	iit the
unique needs of the Subscribing LEA. The P	Provider may withdraw the	General Offer in	n the event of:	(1) a
material change in the applicable privacy stat	ues; (2) a material change	in the services a	nd products lis	ted in
the originating Service Agreement; or three	e (3) years after the date	of Provider's sig	gnature to this	Form.
Subscribing LEAs should	send the	signed	Exhibit	"E"
to Provider at the following email addr	ress: <u>sales@noredink.co</u> r	m	•	
PROVIDER: NoRedInk Corp				

PROVIDER:	NoRedir	ik Corp.

Printed Name: Blake Sipek \_\_\_\_\_\_\_Title/Position: Chief Financial Officer

## 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

Sycamore CUSD 427

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

By: <u>Carl D Vallianatos</u> Date: <u>2024-11-18</u>

Printed Name: <u>Carl D Vallianatos</u> Title: <u>Assistant Superintendent</u>

SCHOOL DISTRICT NAME: McHenry CHSD 156
DESIGNATED REPRESENTATIVE OF LEA:

Name: <u>Carl D Vallianatos</u>
Title: <u>Assistant Superintendent</u>
Address: <u>4716 W. Crystal Lake Rd.</u>

Phone: 8157592261

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