

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 6-2-2021 DATE, 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 - legalteam@overdrive.com

PROVIDER: OverDrive, Inc.

BY:  Date: 5/18/21 PROVIDER SIGN DATE

Erica Lazzaro Executive VP & General Counsel

Printed Name: Title/Position:

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: Fremont Unified School District

BY: Daniel S. Hillman Date: 6/14/2023
DocuSigned by: 1815E616892F4B2...

Printed Name: Daniel Hillman Title/Position: Associate Superintendent

SCHOOL DISTRICT NAME: Fremont Unified School District

DESIGNATED REPRESENTATIVE OF LEA:

Name: _____
Title: _____
Address: _____
Telephone Number: _____
Email: _____

DS
ME