## EXHIBIT "E" GENERAL OFFER OF PRIVACY TERMS

## 1. Offer of Terms

| Provider offers the same privacy protections found in t          | the DPA between it and <b>Dedham Public Schools</b>      |
|--|--|
| ("Originating LEA") which is dated $\frac{10/7/2023}{}$ , to     | o 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 the privacy protections set forth in the DPA, and Provider's  | s signature below shall not bind Provider to any other   |
| terms, such as price, term, or schedule of services, or to any o | ther provision not addressed in the DPA. Any changes     |
| to this Exhibit E template are null and void, however, Provid    | der and the Subscribing LEA may agree to change the      |
| data provided by Subscribing LEA to the Provider to suit the     | e unique needs of the Subscribing LEA. The Provider      |
| may withdraw the General Offer in the event of: (1) a mat        | erial change in the applicable privacy statutes; (2) a   |
| material change in the Services listed in the Service Agreeme    | ent; or (3) at the end of the term set forth in the DPA. |
|  |  |

To indicate Subscribing LEAs acceptance, the Subscribing LEA must send the signed **Exhibit "E"** to Provider at the following email address:

|                                  | <del>-</del>         |
|----------------------------------|----------------------|
| Zoom Video Communications, Inc.  |                      |
| BY: Laboveth Fry AAAAAARTAFBRA77 | Oct 5, 2023<br>Date: |
| Deborah Fay Printed Name:        | Title/Position:      |

## 2. Subscribing LEA

A Subscribing LEA, by agreeing to Provider Terms, and by its signature below, accepts this General Offer of Privacy Terms. The Subscribing LEA and the Provider shall therefore be bound by the same terms of the DPA for the term of the DPA between **Dedham Public Schools** and the Provider. \*\*PRIOR TO ITS EFFECTIVENESS, SUBSCRIBING LEA MUST DELIVER NOTICE OF ACCEPTANCE TO PROVIDER AND PROVIDER MUST PROVIDE A CONFIRMATION OF

By: Amanda Ramsay Date: 2024-03-26

Printed Name: Amanda Ramsay Title/Position: IT Director

SCHOOL DISTRICT NAME: SAU 20

## DESIGNATED REPRESENTATIVE OF LEA

Name: Amanda Ramsay

Title: IT Director

Address: 123 Main St Unit 4, Gorham, NH 03581 Gorham, NH

Telephone Number: <u>603-466-3632</u> Email: <u>amanda.ramsay@sau20.org</u>

COUNTY OF LEA: Coos