

Microsoft | Volume Licensing

Enterprise Signature Form

State and Local

Master Agreement number or Enrollment number* 01E62044

SGN- Proposal ID

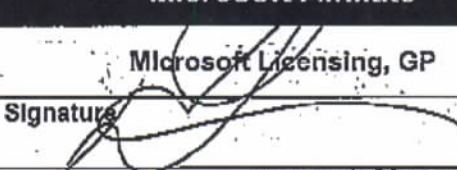
Microsoft to complete if applicable

***Note:** Enter the applicable active numbers associated with the below documents. Microsoft requires the associated active number be indicated here, or listed below as new.

This signature form and all contract documents identified in the table below are entered into between the Customer and the Microsoft Affiliate signing, as of the effective date identified below.

Contract Document	Document Number or Code
<Choose One>	
<Choose One>	
<Choose One>	Document Number or Code
<Choose One>	Document Number or Code
Enterprise Enrollment Renewal Form	X20-01109
Document Description	Document Number or Code
Document Description	Document Number or Code
Document Description	Document Number or Code
Document Description	Document Number or Code

By signing below, Customer and the Microsoft Affiliate agree that both parties (1) have received, read and understand the above contract documents, including any websites or documents incorporated by reference and any amendments and (2) agree to be bound by the terms of all such documents.

Customer	Microsoft Affiliate
Name of Entity * El Dorado County	Microsoft Licensing, GP
Signature *	
Printed Name *	Deborah Moravec
Printed Title *	Program Manager, Compliance
Signature Date *	Signature Date APR 23 2010 <small>(date Microsoft Affiliate countersigns)</small>
Tax ID	Effective Date <small>(may be different than Microsoft's signature date)</small>

* Indicates required field

Optional 2nd Customer signature or Outsourcer Signature (if applicable)

Customer	Outsourcer
Name of Entity *	Name of Entity *
Signature * _____	Signature * _____
Printed Name *	Printed Name *
Printed Title *	Printed Title *
Signature Date *	Signature Date *

If Customer requires physical media, additional contacts, or is reporting multiple previous Enrollments, include the appropriate form(s) with this signature form. If no media form is included, no physical media will be sent.

After this signature form is signed by the Customer, send it and the Contract Documents to Customer's channel partner or Microsoft account manager who must submit them to the following address. When the signature form is fully executed by Microsoft, Customer will receive a confirmation copy.

Microsoft Licensing, GP
 Dept. 551, Volume Licensing
 6100 Neil Road, Suite 210
 Reno, Nevada 89511-1137
 USA

Prepared By: Name of Preparer _____ Email of Preparer _____
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Microsoft | Volume Licensing

Enterprise Enrollment Renewal Form

State and Local

Enrollment Number
(Reseller to complete)

3014068

Please return this form along with Entity's order to the Microsoft Affiliate on the signature form. **This form must be attached to a signature form to be valid.**

For the purposes of this form, "Entity" can mean the signing entity, Customer, Enrolled Affiliate, Integrator, Institution, or other party entering into a volume licensing program agreement.

Use this form to renew the Enrollment specified above. If this form is not submitted, or a new Enrollment executed prior to or at the expiration of the above Enrollment, the Enrollment will expire on the original expiration date.

Please select Entity's Enrollment renewal choice:

12 months

Entity's renewal will be complete when it returns this form and places a valid order for Products and/or services. The Reseller is to help Entity complete its order.

Changing Reseller. If Entity chooses to change its Reseller, Entity must notify Microsoft and the former Reseller, in writing on a form provided at <http://microsoft.com/licensing/contracts> at least 30 days prior to the date on which the change is to take effect. The change will take effect 30 days from the date of Entity's signature on the change of channel partner form.

By renewing, Entity agrees that the Enrollment expiration date will change as provided in this form. The renewal term starts one day following the expiration of the previous term. All other terms and conditions of the Enrollment will apply.

Check if the renewal order will be financed through Microsoft financing.

Reminder: Please be sure to provide a renewal order along with this renewal form.

Reseller acknowledgement:

Name of Reseller Dell Inc

Printed Name Fritzi Mulkey

Printed Title Licensing Specialist

Date 4/20/2010

Reseller Signature

