

# Enterprise Enrollment Add Affiliates Amendment ID M67

Enrollment Number  
*Microsoft to complete for initial term*  
*Partner to complete for renewal*

61664434

7-J4O2CABMI

This amendment ("Amendment") is entered into between the parties identified on the attached program signature form. It amends the Enrollment or Agreement identified above. All terms used but not defined in this Amendment will have the same meanings provided in that Enrollment or Agreement.

Notwithstanding anything to the contrary or in addition to any terms in the Enrollment, the Enrollment is amended as follows:

The section entitled "Enrolled Affiliate's Enterprise" is hereby amended by adding the following election:

Enrolled Affiliate is adding the following additional Affiliate(s):

Ministry of Agriculture of A.R. of Adjara

Ministry of Education, Culture and Sport of A.R. of Adjara

LEPL "Batumi Boulevard"

Department of Roads and Melioration Systems Management of A.R. of Adjara

LEPL Forestry Agency of A.R. of Adjara

Department of Environmental and Natural Resources Protection of A.R. of Adjara

This Affiliate change will not result in a decrease in the total Licenses and/or Software Assurance under the Enrollment. An order to account for any added Affiliates must be submitted with this Amendment.

Except for changes made by this Amendment, the Enrollment or Agreement identified above remains unchanged and in full force and effect. If there is any conflict between any provision in this Amendment and any provision in the Enrollment or Agreement identified above, this Amendment shall control.

**This Amendment must be attached to a signature form to be valid.**



## Program Signature Form

MBA/MBSA number	U7375742	7-J4O2CABMI
Agreement number	61664434	

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

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

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	Number or Code
<Choose Agreement>	Document Number or Code
<Choose Agreement>	Document Number or Code
<Choose Agreement>	Document Number or Code
<Choose Agreement>	Document Number or Code
<Choose Agreement>	Document Number or Code
<Choose Enrollment/Registration>	Document Number or Code
<Choose Enrollment/Registration>	Document Number or Code
<Choose Enrollment/Registration>	Document Number or Code
<Choose Enrollment/Registration>	Document Number or Code
<Choose Enrollment/Registration>	Document Number or Code
Amendment	DTF-0416454.007
Amendment	M67
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**

**Name of Entity (must be legal entity name)\*** LEPL Financial Analytical Service, Ministry of Finance of Georgia

**Signature\*** \_\_\_\_\_

**Printed First and Last Name\*** George Kurtanidze

**Printed Title** Head of Financial-Analytical Service

**Signature Date\*** 24.12.2015



\* indicates required field

**Microsoft Affiliate**

**Microsoft Ireland Operations Limited**

**VAT number** IE8256796U

**Signature** \_\_\_\_\_

**Printed First and Last Name**

**Printed Title**

**Signature Date**

(date Microsoft Affiliate countersigns)

**Agreement Effective Date**

(may be different than Microsoft's signature date)

**Optional 2<sup>nd</sup> Customer signature or Outsourcer signature (if applicable)**

**Customer**

**Name of Entity (must be legal entity name)\***

**Signature\*** \_\_\_\_\_

**Printed First and Last Name\***

**Printed Title**

**Signature Date\***

\* indicates required field

**Outsourcer**

**Name of Entity (must be legal entity name)\***

**Signature\*** \_\_\_\_\_

**Printed First and Last Name\***

**Printed Title**

**Signature Date\***

\* indicates required field

If Customer requires physical media, additional contacts, or is reporting multiple previous Enrollments, include the appropriate form(s) with this signature form.

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 Ireland Operations Limited**  
Atrium Building Block B  
Carmenhall Road  
Sandyford Industrial Estate  
Dublin 18, Ireland  
Attention: EOC Program Operations Dept.

I certify this is a true and correct  
copy of this document effective  
27 DEC 2015  
**15 MAR 2016** ACF  
**Microsoft**  
Microsoft Ireland Operations Ltd.  
Aidan O'Flaherty  
Duly Authorised on behalf of  
Commercial Customer Operations