



**Renewal
ORDER FORM**

EDUSOFT ASSESSMENT MANAGEMENT SYSTEM LICENSE AGREEMENT

LICENSEE INFORMATION			
District:	Mount Diablo Unified School District		
Address:	1936 Carlotta Drive Concord, California 94519-1358		
Tel:	(925) 682-8000	Fax:	(925) 689-1649

Order Form Effective Date	July 1, 2009
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Product	Product Code	Quantity	Unit Price	Total Price	Description
Renewal Module 1 State Analysis	E40714	34,979	\$4.50	\$157,405.50	Annually recurring fee.
Renewal Module 2 Benchmark Exams	E40714	34,979	\$1.25	\$43,723.75	Annually recurring fee.
Renewal Module 3 Teacher Tools	E40714	34,979	\$1.25	\$43,723.75	Annually recurring fee.

Total Amount	\$244,853.00
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Payment Terms. The Total Fee shall be due and payable upon execution of this Order Form. All future License Fees and Licensed Services Fees will be paid no later than thirty (30) days following each one-year anniversary of the Effective Date.

This Order Form Extends the Term of the Edusoft Assessment Management System License Agreement between the parties for one year, subject to further renewal under Section 3 of the Edusoft Assessment Management System License Agreement.

This Order Form, together with the most recently executed Edusoft Assessment Management System Agreement, as amended throughout the date hereof, contains the entire understanding of the parties with respect to their subject matter, supersedes all previous agreements between the parties concerning the subject matter, and cannot be amended except by a writing signed by both parties. Any additional or conflicting terms in any purchase order or other response by Licensee shall be of no effect nor in any way binding upon Riverside.

IN WITNESS WHEREOF, Riverside and Mount Diablo Unified School District have signed and executed this Order Form on the Effective Date by their authorized representatives, in duplicate.

THE RIVERSIDE PUBLISHING COMPANY, LICENSOR	MOUNT DIABLO UNIFIED SCHOOL DISTRICT, LICENSEE
By: _____	By: _____
Printed Name: _____	Printed Name: _____
Title: _____	Title: _____
Date: _____	Date: _____