

In witness of and in agreement with this Agreement's terms, the parties, by their duly authorized representatives, affix their respective signatures:

For Contractor: EXECUSHIELD, INC.

David M. Gonzales
Contractor Signature

02/23/2023
Date

Execushield, Inc.
Contractor Name (please print)

For County:

Purchasing Agent Signature
County of San Mateo
(Department Head of Authorized
Designee)

Date

Purchasing Agent Name (please print)
County of San Mateo
(Department Head of Authorized Designee)