

COST / REIMBURSEMENTS / COMPENSATIONS / FUNDING. All Partnering Agencies agree to fund a cost of \$15,000 or the designated annual amount for UFED Premium Extraction Software, including necessary hardware and software acquisition and support. This amount is calculated by the total cost divided by the number of participating agencies. This amount does not apply to those agencies who purchase more than one PREM access point. Those agencies purchasing additional access points will be required to pay for one equal share price plus the complete cost for each additional access point to be utilized by their agency. This amount is payable at the onset of this MOU and annually thereafter during the month of August, to BCSO. All Partnering Agencies will be responsible for all costs associated with the maintenance, upgrade, and alteration of the Partnering Agency's system and related components at their respective agencies.

TRAINING. All partnering Agencies will be responsible for the cost of any training required to implement the use of Cellebrite UFED Premium.

AFFECT ON ANY PRIOR MOU / AGREEMENT. This MOUS superseded and/or replaces any prior contracts or agreements between the parties related to the subject matter contained herein.

EFFECTIVE DATES AND TERMINATION. This MOU will commence immediately upon signature by all parties. The MOU will automatically renew during each successive year. Any party may opt out of the MOU open thirty (30) day written notice as provided for in this agreement.

AMMENDMENTS. This MOU may *not* be modified or amended except by an instrument of instruments in writing signed by the party against whom enforcement of any such modification or amendment is sought. Either BCSO or the Partnering Agencies may, by an instrument in writing, waive compliance by the other party with any term or provision of this MOU on the part of such other party to be performed or complied with.

MULTIPLE ORIGINALS. This agreement shall be executed in multiple originals and each counterpart shall be given full force and effect.

WITNESS OUR HANDS AND SEALS This _____ day of September, 2021.

Witness

P. J. Tanner
Sheriff, Beaufort County

Date: _____

Witness

Name
Title: _____

Date: _____

Agency: _____