

**RENEW YOUR LEXISNEXIS® PRISON SOLUTION
ORDER NOW BY SIGNING THIS LETTER
AGREEMENT**

Thank you for using LexisNexis, a division of RELX Inc. as your provider of legal research materials for correctional facilities.

Currently you are using the LexisNexis services pursuant to the Prison Solution Agreement or Order (the "Order") that allows you to use selected information relevant to your needs in exchange for a fixed monthly commitment. The Order offers you access to comprehensive content and ease-of-use. However, your LexisNexis service under this Order will expire soon.

By signing below, you may extend the term for the following period at the monthly commitment rate indicated below:

Customer Name:	Laramie County Sheriff Office	Account Number:	1200003473
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Extension Period				Monthly Commitment	
Beginning	4/1/2022	to	3/31/2023	\$	536.00
Beginning	4/1/2023	to	3/31/2024	\$	536.00
Beginning	4/1/2024	to	3/31/2025	\$	536.00

Customer hereby certifies that they have _____ number of inmates

These changes will be effective on 4/1/2022. Except as expressly stated above, all other terms of the Order will remain unchanged and unaffected by this letter agreement.

If you have any questions about your new rate or would like to see a comparison of other pricing options, please contact me, your account representative, at:

Chris Conner
Client Mgr--Corrections
C: 937-344-8496
Toll Free: 866-293-4261
F: 866-960-2944
chris.conner@lexisnexis.com

If you agree with the new monthly commitment and extended term, then please print this message, provide the information requested for the total number of terminals/licenses/locations then sign and date. Upon completion, return the signed letter agreement to me at the fax number listed above. In order for these changes to be effective on the date listed above, please sign and return this letter agreement no later than the _____ of _____.

If you do not respond to this letter, please be advised that the Order will expire at the end of the current commitment period and you will no longer receive updated materials.

Customer Name: Laramie County Sheriff Office

Authorized Signature: _____

Print Name: _____

Title: _____

Date: _____

RECEIVED AND APPROVED AS
TO FORM ONLY BY THE
DEPUTY LARAMIE COUNTY

ATTORNEY
JPC [Signature] 2/25/22