September 30, 2026

Cochise County
1415 West Melody Lane
Bisbee, az 85603

Re: Letter of Understanding between Cochise County and Fidelity Workplace Services LLC ("Fidelity")

Dear Plan Sponsor:

We are very pleased that Cochise County has selected Fidelity to provide Health Savings Accounts ("HSAs") and Flexible Spending Accounts ("FSAs") associated recordkeeping and related services (the "Services"). We look forward to a continued long and mutually beneficial relationship.

This Letter of Understanding:

(1) confirms the mutual commitment of Cochise County and Fidelity to negotiate, in good faith, an HSA and FSA recordkeeping agreement (the "Agreement") / amendment to your existing services agreement with Fidelity (the "Amendment"), which will be created consistent with the product overview and pricing tiers previously provided by Fidelity and as may be modified by additional discovery performed by the parties during the implementation process; and

(2) authorizes Fidelity to proceed with the implementation of the following services:

- Health Savings Accounts
- Health Care Flexible Spending Account
- Dependent Care Flexible Spending Account

As part of the implementation process, and in order to establish a Fidelity HSA, an individual must provide Fidelity with certain personal data. Cochise County directs Fidelity to use personal data acquired by Fidelity in its role as record keeper of certain Cochise County employee benefit plans to help individuals establish a Fidelity HSA on-line. Fidelity may use the following data related to a particular individual to pre-fill that individual's application for a Fidelity HSA:

- Name (first name, middle initial, last name)
- SSN
- Address
- Date of Birth
- Telephone Number (if known)

In addition to the data required for HSA administration, in order to implement FSAs or other reimbursement accounts Cochise County must provide the following to Fidelity:

- Election data, including election start and end dates
- Contribution records (notional) as withheld by payroll
- Plan rules and provisions
- Mechanism for funding paid claims

Fidelity agrees to (i) safeguard this personal data in accordance with its privacy policy, and (ii) exercise at least the same standard of care in safeguarding such data that it uses to protect the personal data of its own employees.

Either party shall have the right to terminate the relationship memorialized in this Letter of Understanding for any reason and without liability before the Agreement / Amendment is executed.

If this Letter of Understanding accurately reflects your understanding of the Services to be provided by Fidelity, and the associated fees as of September 30, 2026, as communicated through the date of this Letter, which may be modified by additional discovery, please sign below and return this Letter to me by October 16, 2026**.**

Should you have any questions, please do not hesitate to call me at 617-563-5563

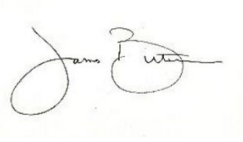
ANTICIPATED CONVERSION DATE: July 1, 2027

Sincerely,



Nichole Weiss
VP, HSA Account Executive

FIDELITY WORKPLACE SERVICES LLC



By:
Name: Jim Bitterman
Title: Head of Healthcare Sales
Date: September 30, 2026

COCHISE COUNTY

By: _____

Name: _____

Title: _____

Date: _____