

FORM A

**New York State Consultant Services
Contractor's Planned Employment**
From Contract Start Date Through the End of the Contract Term

State Agency Name: *The State University of New York - System Admin*
 State Agency Department ID: 28650 Agency Business Unit:
 Contractor Name: *Pharos Systems* Contract Number: *CO03447*
 Contract Start Date: *1 / 1 TBD.* Contract End Date: *1 / 1 TBD.*

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Project Management	1.00	129.90	\$12,081.09
Solution Architect	1.00	129.90	\$12,081.09
Technical Implementation	2.00	277.10	\$25,772.99
Consultant	5.00	692.80	\$64,432.47
Senior Consultant	2.00	114.30	\$10,631.36
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	11.00	1,344.00	\$124,999.00
Grand Total			

Name of person who prepared this report: *Keith M Nickoloff*

Title: *President*

Phone #: *585-749-4847*

Preparer's Signature: *[Signature]*

Date Prepared: *04/18/2019*