AC 3271-S (Effective 4/12)

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: Office of Children and Family ServicesState Agency Department ID: 3400000Agency Business Unit: CFS01Contractor Name: Greycell Labs IncContract Number: PH68912Contract Start Date: 12/18/2023Contract End Date: 12/17/2025

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Computer User Support Specialist 15-1232-00 Hourly Bill Rate: \$ 63.56	1.00	4,000.00	\$254,240.00
	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	\$0.00
	0.00	0.00	\$0.00
Total this Page	1.00	4,000.00	\$254,240.00
Grand Total	1.00	4,000.00	\$254,240.00

Name of person who prepared this report: Donald Butler

Title: Business Systems Analyst 2

Phone #: 212-383-1854

Preparer's Signature: _______ *Donald Butler*

Date Prepared: 12/1/2023

(Use additional pages, if necessary)