

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: City University of New York	
State Agency Department ID: 3330221	Agency Business Unit: CNY01
Contractor Name: I-Link Solutions, Inc.	Contract Number: OC00020
Contract Start Date: 10/24/2023	Contract End Date: 10/23/2025

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
IT Consulting Services, Veerapalli	1.00	3,444.00	\$222,138.00
	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
	0.00	0.00	\$0.00
Total this Page	1.00	3,444.00	\$222,138.00
Grand Total	1.00	3,444.00	\$222,138.00

Name of person who prepared this report: Helena Gacina
 Title: Purchasing Manager
 Preparer's Signature: *Helena Gacina* Phone #: (646)664-3178

(Use additional pages, if necessary)