## FORM A

OSC Use Only:	
Reporting Code:	
Category Code:	
Date Contract Approved:	

## **State Consultant Services - Contractor's Planned Employment**

From Contract Start Date Through The End Of The Contract Term

State Agency				
Name: DCJS			Agency (	Code: 01490
Contractor Name: Syncretic	Inc		Contract	Number: <u>C002205</u>
Contract Start Date: 10/16/	202			
3	Co	ontract End Da	ate: 10/15/2	025
	Number		er of hours	Amount Payable
Employment Category	Employee	es to b	e worked	Under the Contract
15-1211.00 Computer		1	3,846	\$499,980
Systems Analysts				
Name of person who prepared	I this	•		
report:	Christo	pher Puding		
Title: CMS 2			Phone #	: 518-457-7044
Preparer's	6		_	
	opher Puding			
Date	12/20/2022			
Prepared:	12/20/2023			