

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: Department of Health
 State Agency Department ID: 3450261 Agency Business Unit: BEI
 Contractor Name: Sligo Software Solutions Inc. Contract Number: PH68624
 Contract Start Date: 12/28/2023 Contract End Date: 06/26/2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Software Quality Assurance Analysts and Testers 15-1253.00 Hourly Bill Rate: \$59.72	1.00	4,687.50	\$279,937.50
	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
	0.00	0.00	\$0.00
Total this Page	1.00	4,687.50	\$279,937.50
Grand Total	1.00	4,687.50	\$279,937.50

Name of person who prepared this report: Chris Glockler

Title: Manager Information Technology Services 1

Phone #: 518-408-5548

Preparer's Signature: 

Date Prepared: 11/22/2023

