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 Information Technology Services

State Agency Department ID: 1380000 Agency Business Unit: OFT01
Contractor Name: Mindlance Inc. Contract Number: PH68615
Contract Start Date: 08/24/2023 Contract End Date: 02/23/2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
15-1251.00 IT Specialist	1.00	5,000.00	\$396,050.00
	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	5,000.00	\$396,050.00
Grand Total			

Name of person who p	repared this report: Sheila Bachri	
Title: Associate Director		Phone #: 201-535-4043
Preparer's Signature:	Sheila B Smith	
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Date Prepared: 10/04/2023

(Use additional pages, if necessary)