

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: Information Technology Services (ITS)
 State Agency Department ID: 1380000 Agency Business Unit: OFT01
 Contractor Name: OST Inc. Contract Number: PH68619
 Contract Start Date: 10/09/2023 Contract End Date: 04/8/2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Project Manager_ HBITS-05-12870	1.00	5,000.00	\$461,650.00
	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	5,000.00	\$461,650.00
Grand Total	1.00	5,000.00	\$461,650.00

Name of person who prepared this report: Eric Moe

Title: Sr. Contracts Manager

Phone #: 540-333-9430

Preparer's Signature: 

Date Prepared: 12/18/2023