

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 Mental Health State	Agency Business Unit: OMH01
Agency Department ID: 3650000	Contract Number: PH68606
Contractor Name: Computer Technology Services Inc.	Contract End Date: 06/06/2026
Contract Start Date: 12/07/2023	

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Systems Developer 15-1299.08 Hourly Bill Rate: \$81.71	1.00	5200.00	\$424,892.00
	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	\$0.00
Total this Page	1.00	5,200.00	\$424,892.00
Grand Total	1.00	5,200	\$424,892.00

Name of person who prepared this report: Jeffrey Petersen

Title: Contract Management Specialist 2

Phone #: 518-549-1525

Preparer's Signature: _____

Date Prepared: 11/28/2023