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 Labor
State Agency Department ID: 3550000 — Agency Business Unit: DOL01
Contractor Name: Mindlance Inc — Contract Number: PH68615
Contract Start Date: 06/20/2023 — Contract End Date: 06/19/2025

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
15-1251.00	1.00	4,000.00	$267,720.00
	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	4,000.00	$267,720.00
Grand Total			

Name of person who prepared this report: Chris Benjumea
Title: Onboarding Manager
Phone #:
Preparer's Signature: _____
Date Prepared: / / 06 / 21 / 2023

(Use additional pages, if necessary)

Doc ID: 1029f9582a0c6f0675aad8277ae731d5b20fe56d