OSC Use Only:	
Reporting Code:	
Category Code: Date Contract Approved:	

FORM A

State Consultant Services - Contractor's Planned Employment							
From Contract Start Date Through The End Of The Contract Term							
State Agency Name:	NYS Insurance Fund	Agency Code: 7010204					
Contractor Name: K	ame: Knowledge Builders Inc			Contract Number: PR 10			
Contract Start Date: 0	Date: 04/13/23			Contract End Date: 10/12/25			
Employment Category	Number of Employees		of hours to be	Amou	unt Payable Under the Contract		

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract			
15-1199.02	1	5016	\$462,425.07			
			-			
			-			
			-			
			-			
			1 122 122 2			
Total this page	1	5016	\$462,425.07			
Grand Total	1	5016	\$462,425.07			
Name of person who prepared this report:Sanjay Kapalli						
Title: Executive Vice president	tle:Executive Vice president Phone #:518-250-4189					
Preparer's Signature:	Mary 1					
Date Prepared:4/26/2023						

(Use additional pages, if necessary)

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