AC 3271-S (Effective 4/12)

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: OCFS

State Agency Department ID: 3400000 Agency Business Unit: CFS01 Contractor Name: Sligo Software Solutions Inc Contract Start Date: 4/25/24 Contract End Date: 4/24/26

Employment Category	Number of Employee s	Number of Hours to be Worked	Amount Payable Under the Contract
System Developer 15–1252.00 Hourly Bill Rate \$76.96	1.00	4,000.00	\$ 307,840.00
	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	\$307,840.00
Grand Total	1.00	4,000.00	\$307,840.00

Name of person who prepared this report: Janice Blair

Title: Manager Phone #: 518-402-0147

Preparer's Signature: Janice Blair

Date Prepared: 4/8/2024

(Use additional pages, if necessary)

Page 1 of 1