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: Department of Health State Agency Department ID: 3450261 Contractor Name: Sligo Software Solutions Inc Contract Start Date: 4/15/2024

Agency Business Unit: DOH01 Contract Number: PH68624 Contract End Date: 03/31/2025

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Database Administrator Hourly Bill Rate \$78.96	1.00	1,875.00	\$148,050.00
	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	1,875.00	\$148,050.00
Grand Total	1.00	1,875.00	\$148,050.00

Name of person who prepared this report: Prakash Lal

Title: Manager Information Technology Services1 Preparer's Signature: Date Prepared: 3/29/2024 Phone #: 518-408-2388

(Use additional pages, if necessary)

Page of