

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: DOH

State Agency Department ID: 3450000

Agency Business Unit: 50420

Contractor Name: Hareesh Atluri

Contract Number: PH68613

Contract Start Date: 06/24/2024

Contract End Date: 12/23/2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
15-1299.09	1.00	5,200.00	\$500,811.90
	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	\$500,811.90
Grand Total	1.00	5200.00	\$500,811.90

Name of person who prepared this report: Gerardo Cioffi

Title: Business Systems Analyst

Phone #: 518 457-7691

Preparer's Signature: Gerardo J Cioffi

Date Prepared: 06/24/2024

(Use additional pages, if necessary)

Page 1 of 1