

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: 3450000

Contractor Name: FNU Sai Lalitha Magapu

Contract Start Date: 8/22/2024

Agency Business Unit: DOH01

Contract Number: PH68613

Contract End Date: 10/21/2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Software Analyst 15-1253.00 Hourly Bill Rate: \$81.11	1.00	4,520.00	\$366,617.20
	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	4,520.00	\$366,617.20
Grand Total	1.00	4520.00	\$366,617.20

Name of person who prepared this report: Lei Zhu

Title: Information Technology Specialist 4

Preparer's Signature: 

Phone #: 518-402-3650

Date Prepared: 07/18/2024