

**FORM A**

<b>New York State Consultant Services</b> <b>Contractor's Planned Employment</b> From Contract Start Date Through the End of the Contract Term
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State Agency Name: Department of Health	
State Agency Department ID: 3450000	Agency Business Unit: DOH01
Contractor Name: Sligo Software Solutions Inc	Contract Number: PH68624
Contract Start Date: 9/16/2024	Contract End Date: 3/15/2027

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
15-1252.00, Software Developer Hourly Bill Rate: \$78.88	1.00	4,920.00	\$388,089.60
	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	4,920.00	\$388,089.60
<b>Grand Total</b>	<b>1</b>	<b>4,920.00</b>	<b>\$388,089.60</b>

Name of person who prepared this report: Jeff Jensen

Title: Business Solutions Director

Phone #: 518-408-1120

Preparer's Signature: \_\_\_\_\_

Date Prepared: 8/30/2024