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 Labor

(Use additional pages, if necessary)

State Agency Department ID: 3550000 Agency Business Unit: DOL01 Contractor Name: Greycell Labs Inc Contract Number: PH68912 Contract Start Date: 03/06/2025 Contract End Date: 03/5/2027

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
15-1251.00 Expert IT Specialist, Hourly Bill Rate \$86.75 per Hr.	1.00	5,000.00	\$433,750.00
	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	5,000.00	\$433,750.00
Grand Total	1.00	5,000.00	\$433,750.00

Name of person who p	repared this report: Sasmita Pandey	
Title: Manager	Samita Pandan	Phone #: (518)-600-1819
Preparer's Signature:	Sasmita Pandey	
Date Prepared: 02/27/2	025	

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