## **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: NYS ITS

State Agency Department ID: 1380000 Agency Business Unit: OFT01
Contractor Name: Unique Comp Inc Contract Number: PH69632
Contract Start Date: 07/03/2024 Contract End Date: 01/2/2027

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Software Developer 15-1252.00 Hourly Bill Rate: \$97.90	1.00	5,000.00	\$489,500.00
	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	\$489,500.00
Grand Total	1.00	5,000.00	\$489,500.00

Name of person who prepared this report: Diana Tacuri	
Title: Sr. Resource Manager	Phone #: (718)392-5100 x 408
Preparer's Signature: Siana Tacuri	
Date Prepared: 7 /01/ 2024	