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: Mindlance Inc Contract Number: PH68615
Contract Start Date: 09/16/2024 Contract End Date: 09/15/2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Software Developer 15-1252.00 Hourly Bill Rate: \$95.63	1.00	4,000.00	\$382,520.00
	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	4,000.00	\$382,520.00
Grand Total			

Name of person who prepared this report: Khushboo Palod	
Title: Manager, OB	Phone #: 908 450 9426
Preparer's Signature:	
Date Prepared:08 <i>/</i> 12/2024	