

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: NYS ITS | Agency Business Unit: OFT01 |
| State Agency Department ID: 1380000 | Contract Number: PH68617 MB WB SB |
| Contractor Name: MVP Consulting Plus, Inc. | Contract End Date: 09/29/2026 |
| Contract Start Date: 09/30/2024 | |

| Employment Category | Number of Employees | Number of Hours to be Worked | Amount Payable Under the Contract |
|---|---------------------|------------------------------|-----------------------------------|
| Business Analyst 15-2051.01 Hourly bill rate \$77.30 | 1.00 | 4,000.00 | \$309,200.00 |
| | 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 |
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| | 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 | \$309,200.00 |
| Grand Total | 1.00 | 4,000.00 | \$309,200.00 |

Name of person who prepared this report: Nancy Gordon

Title: Contract Manager

Phone #: 518-218-1700

Preparer's Signature: Nancy A. Gordon

Date Prepared: 09/12/2024

(Use additional pages, if necessary)

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