

## **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 Office of the State Comptroller

State Agency Department ID: 3050000

Agency Business Unit: OSC01

Contractor Name: i-Link Solutions, Inc.

Contract Number: PH68611

Contract Start Date: 10/11/2024

Contract End Date: 10/9/2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
IT Specialist - MidLevel Hourly Rate \$57.57/hour	1.00	4,000.00	\$230,280.00
	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	\$0.00
	0.00	0.00	\$0.00
Total this Page	1.00	4,000.00	\$230,280.00
<b>Grand Total</b>	1.00	4,000.00	\$230,280.00

Name of person who prepared this report: Devon Wright

## Title: Dir. Gov't Relations

On the Report Box

Phone #: 571-348-0810

Preparer's Signature:

Date Prepared: 09/24/2024

(Use additional pages, if necessary.)

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