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: Office of Information Technology Services
State Agency Department ID: 1380000 Agency Business Unit: OFT01
Contractor Name: OST, Inc. Contract Number: PH68619
Contract Start Date: 11/13/2025 Contract End Date: 11/12/2027

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Project Manager - Expert - HBITS-07-14198 Hourly Bill Rate - $97.29	1.00	4,000.00	$389,160.00
	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	$389,160.00
Grand Total	1.00	4,000.00	$389,160.00

Name of person who prepared this report: Jim Bottorff
Title: Chief Financial Officer Phone #: 703-462-9649
Preparer's Signature: _____
Date Prepared: 09/24/2025

(Use additional pages, if necessary) Page of