

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: Mindlance Inc. Contract Number: PH68615
 Contract Start Date: 2/24/2026 Contract End Date: 8/23/2028

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
IT Specialist 15-1251.00 Hourly Bill Rate: \$81.03	1.00	5,000.00	\$405,150.00
	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	5,000.00	\$405,150.00
Grand Total	1.00	5,000.00	\$405,150.00

Name of person who prepared this report: Khushboo Palod

Title: Sr. Delivery Manager Onboarding

Phone #: 908 450 9426

Preparer's Signature: 

Date Prepared: 1/13/2026