

**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 Information Technology Services  
 State Agency Department ID: 1380000 Agency Business Unit: OFT01  
 Contractor Name: System Edge (USA) LLC Contract Number: PH68628  
 Contract Start Date: 02/23/2026 Contract End Date: 08/22/2028

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
IT Specialist/Expert 07-14498	1.00	5,000.00	\$399,850.00
Hourly Bill Rate: \$79.97	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
<b>Total this Page</b>	1.00	5,000.00	\$399,850.00
<b>Grand Total</b>	1.00	5,000.00	\$399,850.00

Name of person who prepared this report: Leon D. Austin

Title: Business Development Manager

Phone #: 732-283-2647

Preparer's Signature: 

Date Prepared: 02/02/2026