

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 Mental Health	
State Agency Department ID: 3650000	Agency Business Unit: OMH01
Contractor Name: Trigyn Technologies Inc	Contract Number: PH68631
Contract Start Date: 12/15/2025	Contract End Date: 06/14/2028

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Systems Developer 15-1231.00 Hourly Bill Rate \$86.51	1.00	5,200.00	\$449,852.00
	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	5,200.00	\$449,852.00
Grand Total	1.00	5,200.00	\$449,852.00

Name of person who prepared this report: Pradeep Inampudi
 Title: Contract Management Specialist Phone #: 518-549-5206
 Preparer's Signature: Pradeep Inampudi
 Date Prepared: 11/12/2025