

**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: Computer Technology Services Inc Contract Number: PH68606  
 Contract Start Date: 11/26/2025 Contract End Date: 05/25/2028

| Employment Category                                       | Number of Employees | Number of Hours to be Worked | Amount Payable Under the Contract |
|---|---------------------|------------------------------|-----------------------------------|
| Software Developer 15-1231.00<br>Hourly Bill Rate \$85.17 | 1.00                | 5,200.00                     | \$442,884.00                      |
|   | 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                     | \$442,884.00                      |
| <b>Grand Total</b>  | 1.00                | 5,200.00                     | \$442,884.00                      |

Name of person who prepared this report: Pradeep Inampudi  
 Title: Contract Management Specialist Phone #: 518-549-5206  
 Preparer's Signature: Pradeep Inampudi  
 Date Prepared: 11/18/2025