

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 Department of Health
 State Agency Department ID: 3450000 Agency Business Unit: 3450449
 Contractor Name: Trigyn Technologies, Inc. Contract Number: PH68631
 Contract Start Date: 11/16/2023 Contract End Date: 5/15/2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
05-12990 Project Manager	1.00	4500	\$384,885.00
	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	0.00	0.00	\$ 0.00
Grand Total		4500	\$384,885.00

Name of person who prepared this report: Kathleen Brousseau

Title: Bureau Director

Phone #: 518-903-0146

Preparer's Signature: 

Date Prepared: 11/7/2023