

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: OMH	Agency Business Unit: OMH01
State Agency Department ID: 3650000	Contract Number: PH68611
Contractor Name: iLink Solutions, Inc.	Contract End Date: 6/14/2026
Contract Start Date: 12/14/2023	

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
15-1299.09 Information Technology Project Managers	1.00	5,200.00	\$301,236.00
	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	\$301,236.00
Grand Total	1.00	5,200.00	\$301,236.00

Name of person who prepared this report: Michael Cestaro

Title: Contract Management Specialist

Phone #: 5185491547

Preparer's Signature: Michael Cestaro

Date Prepared: 11/7/2023