

Form A State Consultation Services Contractor's Planned Employment

Number*	Title
OCHBIT13189	QA TESTER

*For example, "Number" may be an OPRHP-Specific Solicitation, Contract, RFQ, or Bid reference number.

OSC Use Only				
Reporting Code:				
Category Code:				
Date Contract Approved:				

Planned Employment from Contract Start Date Through the End of the Contract Term

State Agency Name:NYS OPRHPAgency Code:49070Contractor Name:GREYCELL/Abhay ShulkaContract Number:OCHBIT13189Contract Start Date:2/1/24Contract End Date:1/31/26

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
QA TESTER	1	3900	\$233376.00
Hourly Bill Rate: \$59.84			
15-1253.00			
Total This Page	1	3900	233376
Total Additional Pages			
Grand Total	1	3900	233376

Use Additional Pages, If Necessary

Name of Official:OLIVIA DIPACE	TitleQA TESTER	
E-Mail OLIVIA.DIPACE@PARKS.NY.GOV	Telephone:518-473-8923	
Sign & Date Here	02/28/2024	
Signature	Date	

Unless otherwise requested by OPRHP, please sign in ink as electronic signatures are not acceptable. A scanned copy of the original ink signature is acceptable.