

**FORM A**

New York State Consultant Services <b>Contractor's Planned Employment</b> From Contract Start Date Through The End Of The Contract Term
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State Agency Name: <b>Office of the State Comptroller</b>	
State Agency Department ID: 305 0000	Agency Business Unit: 08001
Contractor Name: <i>Maker Enterprises Inc.</i> <i>DBA Sagus IT Solutions</i>	Contract Number: C000975
Contract Start Date: 6/3/2015	Contract End Date: 6/12/2016

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
<i>Solution Architect/ Bureau of Contracts</i>	1	2020	\$200,000
Total this page	0	0	\$ 0.00
<b>Grand Total</b>			\$200,000

Name of person who prepared this report: *JOELLE A. CARMICHAEL*  
 Title: *PRESIDENT*  
 Preparer's Signature: *Joelle A. Carmichael*  
 Date Prepared: *4/27/2015*  
 (Use additional pages, if necessary)

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