EXHIBIT A-2

Statement of Work Template

Original ☐ **Amended** ☒

STATEMENT OF WORK FOR IT CONTINGENT WORKERS BETWEEN STATE OF MISSISSIPPI, DEPARTMENT OF EDUCATION AND GUIDESOFT, INC., d/b/a KNOWLEDGE SERVICES

12/19/2019

John Kraman
State of Mississippi, Department of Education
PO Box 771 Jackson, MS 39205-0771

Authorization for work performed pursuant to this Statement of Work ("SOW") is granted under the terms of the Master Consulting Services Agreement between GuideSoft, Inc. d/b/a Knowledge Services and Mississippi Department of Information Technology Services.

• **Knowledge Services Posting Number:**	64142
• **IT Contingent Worker Name:**	Sukarna Mothukuri
• **Vendor Name:**	Radiant Systems Inc.
• **Position Title:**	Enterprise Architect
• **Regular Hourly Bill Rate:**	$124.00
• **OT Hourly Bill Rate** *(if applicable)*:	$124.00
• **Original Number of Hours to be worked:**	704
• **Amended Number of Hours to be worked:**	Click or tap here to enter text.
• **Original Total Cost of SOW:** *(Not to exceed)*	$87,296
• **Amended Total Cost of SOW:** *(Not to exceed)*	Click or tap here to enter text.
• **Start Date of Service:**	9/23/2019
• **Original End Date of Service:**	1/22/2020
• **Amended End Date of Service:**	Click or tap to enter a date.
• **Work Location:**	359 North West Street, Jackson, MS 39201

For the faithful performance of the terms of this Statement of Work, the parties hereto have caused this Statement of Work to be executed by their undersigned authorized representatives.

Mississippi Department of Department of Education	**GuideSoft Inc., d/b/a Knowledge Services**
Authorized Signature	Doreen DeLancy *Authorized Signature*
John Kraman *Printed Name*	Doreen DeLancy *Printed Name*
CIO *Title*	Program Manager *Title*
12-19-19 *Date*	12/19/2019 *Date*