

EXHIBIT A-2
Statement of Work Template – FOR INFORMATION PURPOSES ONLY

STATEMENT OF WORK FOR IT CONTINGENT WORKERS
BETWEEN
Mississippi Department of Human Services
AND
GUIDESOFT, INC., d/b/a KNOWLEDGE SERVICES

February 21, 2018

John Davis
Mississippi Department of Human Services
750 North State Street
Jackson, MS 39202


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:** 51361
- **IT Contingent Worker Name:** Uday Gouni
- **Position Title:** .NET Developer
- **Regular Hourly Bill Rate:** \$ 70.00
- **OT Hourly Bill Rate** (if applicable): \$ 70.00
- **Knowledge Services Not to Exceed Rate:** \$161,000.00 yearly
- **Number of Hours to be worked:** 2300 Hours
- **Total Cost of SOW:** \$ 483,000.00 (3 year term)
- **Start Date of Service:** 3/5/18
- **End Date of Service:** 3/5/21
- **Work Location:** 750 North State Street Jackson, MS 39202

Name of Vendor providing IT Contingent Worker: IRG Inc.

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 Human Services

DocuSigned by:

Authorized Signature

Jerry D Butler for John Davis
Printed Name

Deputy Director of Administration
Title

2/23/2018
Date

GuideSoft Inc., d/b/a Knowledge Services

Doreen DeLancy
Authorized Signature

Doreen DeLancy
Printed Name

Program Manager
Title

February 21, 2018
Date