EXHIBIT A-2

Statement of Work Template

Original 🗌 Amended 🖂

STATEMENT OF WORK FOR IT CONTINGENT WORKERS BETWEEN STATE OF MISSISSIPPI, Department of Employment Security AND GUIDESOFT, INC., d/b/a KNOWLEDGE SERVICES

2/10/2025

Dr. William J. Ashley Department of Employment Security 1235 Echlon Parkway Jackson, MS 39213

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:
- IT Contingent Worker Name:
- Vendor Name:
- Position Title:
- Regular Hourly Bill Rate:
- **OT Hourly Bill Rate** (if applicable):
- Original Number of Hours to be worked:
- *Amendment 1: Additional Number of hours to be worked:
- *Amendment 2: Additional Number of hours to be worked:
- *Amendment 3: Additional Number of hours to be worked:
- Original Total Cost of SOW: (Not to exceed)
- *Amendment 1: Additional Cost of SOW: (Not to exceed)
- *Amendment 2: Additional Cost of SOW: (Not to exceed)
- *Amendment 3: Additional Cost of SOW: (Not to exceed)
- Start Date of Service:
- Original End Date of Service:
- *Amendment 1: New End Date of Service:
- *Amendment 2: New End Date of Service:
- *Amendment 3: New End Date of Service:
- Work Location:

\$150.00 \$150.00 2080 4160 Click or tap here to enter text. Click or tap here to enter text. \$312,000.00 \$624,000.00 Click or tap here to enter text. Click or tap here to enter text.

HTC Global Services Inc.

3/18/2024

3/17/2025 3/17/2027

126883

Architect

Jitendra Sahoo

Click or tap to enter a date. Click or tap to enter a date. MDES State Office

* Please do not add the amendments to the original number of hours or original cost of the SOW. The amendment is the amount you are adding to the contract. 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 Employment Security

William J. Asliley, flu. J. Authorized Signature

William J. Ashley, Ph.D. Printed Name

Executive Director

Title

2/19/2025

Date

GuideSoft Inc., d/b/a Knowledge Services

Katie Belange

Authorized Signature

Katie Belange

Printed Name

Corporate Counsel

Title

02/25/2025 nter a date.

Date