## EXHIBIT A-2

#### **Statement of Work Template**

Original Amended

#### STATEMENT OF WORK FOR IT CONTINGENT WORKERS BETWEEN STATE OF MISSISSIPPI, Department of Child Protective Services AND GUIDESOFT, INC., d/b/a KNOWLEDGE SERVICES

5/5/2022

Michael Pantin Department of Child Protective Services 750 North State Street Jackson, MS 39201

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:

101989 Roy Clay Wood New York Global Consultants Inc. Natural Developer \$118.00 \$118.00 2080 Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.

### \$ 245,440

Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text. 5/16/2022

# 5/15/2023

Click or tap to enter a date. Click or tap to enter a date. Click or tap to enter a date. Remote

\* 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 Child Protective Services

<u>Autorized Signature</u>

Michael Pantin Printed Name

Chief Information Officer

5/5/2022

Date

#### GuideSoft Inc., d/b/a Knowledge Services

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Authorized Signature

Katie Belange Printed Name

**Corporate Counsel** 

Title

May 6, 2022

Date