IS

EXHIBIT A-2

Statement of Work Template

Original Amended

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

7/6/2023

Mississippi Department of Human Services 200 South Lamar 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: 116015

IT Contingent Worker Name: Elizabyth Harrington
 Vendor Name: Vertisystem Inc.
 Position Title: Quality Assurance

Regular Hourly Bill Rate: \$105.00
 OT Hourly Bill Rate (if applicable): \$105.00
 Original Number of Hours to be worked: 6900 HOURS

Amendment 1: Number of hours to be worked: N/A
 Amendment 2: Number of hours to be worked: N/A
 Amendment 3: Number of hours to be worked: N/A

• Original Total Cost of SOW: (Not to exceed) \$724,500.00

Amendment 1: Total Cost of SOW: (Not to exceed)
 Amendment 2: Total Cost of SOW: (Not to exceed)
 Amendment 3: Total Cost of SOW: (Not to exceed)

Start Date of Service: 7/24/2023
 Original End Date of Service: 7/24/2026

Amendment 1: End Date of Service: N/A
 Amendment 2: End Date of Service: N/A
 Amendment 3: End Date of Service: N/A

• Work Location: 200 South Lamar Street

Jackson, MS 39202

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.

Missis आकृषिण Department of Human Services	GuideSoft Inc., d/b/a Knowledge Services Katie Belange Katie Belange (Int. 7 203 07:07 EDT)
Authorized Signature	Authorized Signature
Robert G. Anderson	Katie Belange
Printed Name	Printed Name
Executive Director	Corporate Counsel
Title	Title
7/12/2023	_Jul 7, 2023
Date	Date