

**EXHIBIT A-2**

**Statement of Work Template**

Original  Amended

**STATEMENT OF WORK FOR IT CONTINGENT WORKERS  
BETWEEN  
University of Mississippi Medical Center  
AND  
GUIDESOFT, INC., d/b/a KNOWLEDGE SERVICES**

9/23/2022

University of Mississippi Medical Center  
2500 North State Street  
Jackson, MS 39216

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:** 108858
- **IT Contingent Worker Name:** Felicity Scott
- **Vendor Name:** Queen Consulting
- **Position Title:** Epic Certified Cupid Analyst
- **Regular Hourly Bill Rate:** \$131.00
- **OT Hourly Bill Rate (if applicable):** \$131.00
- **Original Number of Hours to be worked:** 960
- **\*Amendment 1: Additional Number of hours to be worked:** Click or tap here to enter text.
- **\*Amendment 2: Additional Number of hours to be worked:** Click or tap here to enter text.
- **\*Amendment 3: Additional Number of hours to be worked:** Click or tap here to enter text.
- **Original Total Cost of SOW: (Not to exceed)** \$125,760
- **\*Amendment 1: Additional Cost of SOW: (Not to exceed)** Click or tap here to enter text.
- **\*Amendment 2: Additional Cost of SOW: (Not to exceed)** Click or tap here to enter text.
- **\*Amendment 3: Additional Cost of SOW: (Not to exceed)** Click or tap here to enter text.
- **Start Date of Service:** 10/3/2022
- **Original End Date of Service:** 4/30/2023
- **\*Amendment 1: New End Date of Service:** Click or tap to enter a date.
- **\*Amendment 2: New End Date of Service:** Click or tap to enter a date.
- **\*Amendment 3: New End Date of Service:** Click or tap to enter a date.
- **Work Location:** 2500 N. State St.  
Jackson, MS 39216

*\* 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.

**University of Mississippi Medical Center**

DocuSigned by:



585669F93778432

Authorized Signature

Brian Rutledge, PhD.

Printed Name

Chief of Staff, Office of the Vice  
Chancellor

Title

10/4/2022

Date

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

Katie Belange

Authorized Signature

Katie Belange

Printed Name

Corporate Counsel

Title

Oct 3, 2022

Date