



**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**

7/31/2024

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:** 90324
- **IT Contingent Worker Name:** Malcolm James
- **Vendor Name:** James Consulting
- **Position Title:** Developer
- **Regular Hourly Bill Rate:** \$70.00
- **OT Hourly Bill Rate (if applicable):** \$70.00
- **Original Number of Hours to be worked:** 6900
- **Amendment 1: Number of hours to be worked:** 4600 hours
- **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)** \$483,000.00
- **Amendment 1: Total Cost of SOW: (Not to exceed)** \$322,000.00
- **Amendment 2: Total Cost of SOW: (Not to exceed)** N/A
- **Amendment 3: Total Cost of SOW: (Not to exceed)** N/A
- **Start Date of Service:** 9/1/2021
- **Original End Date of Service:** 9/1/2024
- **Amendment 1: End Date of Service:** 9/1/2026
- **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.

DocuSigned by:  
**Mississippi Department of Human Services**  
*Maureen McDonald*  
 989AD83385F0409...  
 \_\_\_\_\_  
 Authorized Signature  
 \_\_\_\_\_  
 Maureen McDonald  
 \_\_\_\_\_  
 Printed Name  
 \_\_\_\_\_  
 Deputy - Human Capital and Technology  
 \_\_\_\_\_  
 Title  
 \_\_\_\_\_  
 8/1/2024  
 \_\_\_\_\_  
 Date

**GuideSoft Inc., d/b/a Knowledge Services**  
*Katie Belange*  
 \_\_\_\_\_  
 Authorized Signature  
 \_\_\_\_\_  
 Katie Belange  
 \_\_\_\_\_  
 Printed Name  
 \_\_\_\_\_  
 Corporate Counsel  
 \_\_\_\_\_  
 Title  
 \_\_\_\_\_  
 Aug 1, 2024  
 \_\_\_\_\_  
 Date