OSC Use	Only:
Reporting	
Category	Code:
Date Cont	ract Approved:

FORM A

State Consultant Services - Contractor's Planned Employment From Contract Start Date Through The End Of The Contract Term

State Agency Name: NYS Do H Contractor Name: New York State Technology Enterprise Corporation

Agency Code: /2000 Contract Number: CMIC5247-B485

Contract Start Date: 9/1/2015

Contract End Date: 3/30/2016

Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
N	630	109659.90
4	630	109659.90
4	630	109659.90
	. Behe behe@ny	
	Employees M 4 4 this report: Jana S	Employees be worked \mathcal{M} \mathcal{G} 30 \mathcal{M} \mathcal{G} 30 \mathcal{M} \mathcal{G} 30 \mathcal{M} \mathcal{G} 30 \mathcal{M} \mathcal{G} 30 \mathcal{M} \mathcal{G} 30 this report: Jana S. Behe behe@ny

Preparer's Signature: Date Prepared:

8/17/2015

(Use additional pages, if necessary)/

Page 1 of 1