

OSC Use Only:
 Reporting Code:
 Category Code:
 Date Contract 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 OPWDD CNYDDSO Region 2 Agency Code: 51940/3660230
 Office
 Contractor Name: Total Healthcare Staffing Contract Number: CoSBR00011
 Contract Start Date: 12/01/2015 Contract End Date: 11/30/2020

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
31-1012.00	15	11250 hours	\$12.95 per hour
Total this page	0	0	\$ 0.00
Grand Total			\$145,687.50

Name of person who prepared this report: Dana Gibaldi
 Title: Director of Operations Phone #: 516-409-9211
 Preparer's Signature: Dana Gibaldi
 Date Prepared: 10/30/15

(Use additional pages, if necessary) Page
 Prepared with assistance from Grayam Dorschel, CMST1 of the Contract Management
 Unit of the CNYDDSO Region 2 Office.


 Grayam Dorschel, CMST1