

CFS01-C027776-3400000

<b>OSC Use Only:</b>
Reporting Code: <u>CE</u>
Category Code: _____
Date Contract Approved: _____

NEW YORK STATE  
OFFICE OF CHILDREN AND FAMILY SERVICES  
**STATE CONSULTANT SERVICES - CONTRACTOR'S PLANNED EMPLOYMENT**  
**FROM CONTRACT START DATE THROUGH THE END OF THE CONTRACT TERM**

**FORM A**

<b>State Agency Name:</b> <u>NYS Office of Children and Family Services</u>	<b>Agency Code:</b> <u>3400000</u>
<b>Contractor Name:</b> <u>New York Public Welfare Association</u>	<b>Contract Number:</b> _____
<b>Contract Start Date:</b> <u>1/1/2016</u>	<b>Contract End Date:</b> <u>12/31/2016</u>

<b>Employment Category</b> <a href="http://www.onetcodeconnector.org/">http://www.onetcodeconnector.org/</a>	<b>Number of Employees</b>	<b>Number of hours to be worked</b>	<b>Amount Payable Under the Contract</b>
Executive Director	1	184	\$9,974.00
Director of Member Services	1	766	\$27,801.00
Administrative Coordinator	1	371	\$7,197.00
Consultant	1	180	\$13,500.00
<b>Total this page</b>	4	1,501	\$ 58,472.00
<b>Grand Total</b>	4	1,501	\$ 58,472.00

**Name of person who prepared this report:** Lisbeth Keitel

**Title:** Director of Member Services/Project Coordinator      **Phone #:** 518-465-9305

**Preparer's Signature:** *Lisbeth Keitel*

**Date Prepared:** 11/19/2015

(Use additional pages, if necessary)