

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 Dept. of Financial Services Agency Code: 37000
 Contractor Name: IMEDECS Contract Number: C000417a
 Contract Start Date: 04/01/2015 Contract End Date: 08/31/2021

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Executive	1	2,232	312,500
Professional	3	6,694	937,500
Total this page			
Grand Total	4	7,926	1,250,000

Name of person who prepared this report: Deahna Montaque
 Title: VP, Operations
 Preparer's Signature: *Deahna Montaque*
 Date Prepared: 11/19/2015
 (Use additional pages, if necessary)
 Phone #: 215.855.4633 ext 304
Steven McClellan
 516-473-7897
 Page (of)