CONSULTANT DISCLOSURE FORM A

Complete instructions may be accessed at: http://www.osc.state.ny.us/agencies/gbull/g-226.htm

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: NYSDOBAgency Code: 01010Contractor Name: KPMG LLPContract Number: C000444Contract Start Date: 3/1/16Contract End Date: 2/28/21

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
13-2011.01 – Accountants	35	42,476	\$6,958,869
		10 100	
Total this page	35	42,476	\$6,958,869
Grand Total	35	42,476	\$6,958,869

Name of person who prepared this report: Michelle Heaslip

Phone #: 518-474-4421

Preparer's Signature: Date Prepared: 2/23/16

Title: Contract Administrator