AC 3271-S (Effective 4/12)

FORM A

New York State Consultant Services **Contractor's Planned Employment**

Reporting Code: CM Method of Award: Term G-1 From Contract Start Date Through the End of the Contract Term

State Agency Name: Governor's Office of Employee Relations State Agency Department ID: 1120000 Agency Business Unit: OER01 Contractor Name: Joel Douglas Contract Number: S15010 Contract Start Date: 01/01/2016 Contract End Date: 12/31/2016

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
23-1022.00 - Arbitrators, Mediators, and Conciliators	1.00	1,152.00	\$58,998.00
Total this Page	1.00	1,152.00	\$58,998.00
Grand Total			

Name of person who prepared this report: Brandy Snyder

Title: Contract Management Specialist 1

Blandy Mhyder Preparer's Signature: Date Prepared: / /

Phone #: 518-473-1078

(Use additional pages, if necessary)

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