

FORM A

New York State Consultant Services
Contractor's Planned Employment
 From Contract Start Date Through The End Of The Contract Term

State Agency Name: **Office of the State Comptroller**
 State Agency Department ID: 3050000 Agency Business Unit: OSC01
 Contractor Name: Xerox State & Local Solutions Contract Number: C000997
 Contract Start Date: / / upon approval Contract End Date: / / 5 years after approval

5 yrs from OSC Approval

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
13-2011.02	10	50,000	\$5,000,000
Total this page	0	0	\$5,000,000
Grand Total			\$5,000,000

Name of person who prepared this report: Mary Slusarz
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 Preparer's Signature: *Mary Slusarz*
 Date Prepared: 05/31/2016
 (Use additional pages, if necessary)