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: Cognitive Therapy of SI PSLMHC

Contract Number: C012773

PLLC

Contract Start Date: 10//1/2016

Contract End Date: 5/31/2018

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Psychologists (19-301-02)	2	1,250	\$ 50,000
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Total this page	2	1,250	\$50,000
Grand Total	2	1,250	\$ 50,000

Name of person who prepared this report: Dr. Constance/Salhany

Title: President

Phone #: 347-273-1290

Preparer's Signature Date Prepared: 8/22/2016

(Use additional pages, if necessary)

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