DOB01- (MS3000-1050000

Form A

Reporting Code: CA

New York State Consultant Services Contractor's Planned Employment From Contract State Date Through the End of the Contract Term

State Agency Name: DEC, DOL, DPS, DOT,

DOB, HCR

State Agency Department ID: 3350000, 3550000,

3750000, 3900283, 1050000, 1170000

Contractor Name: Fried, Frank, Harris, Shriver &

Jacobson LLP

Contract State Date: 04/29/2016

Agency Business Unit: DEC01, DOL01, DPS01, DOT01, DOB01, HCR01
Contract Number: DEC01-CMS3000-3350000, DOL01-CMS3000-3550000, DPS01-CMS3000-3750000, DOT01-CMS3000-3900283, DOB-CMS3000-1050000, HCR01-CMS3000-1170000

Contract End Date: 12/31/2017

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
23-1011.00 Partner/Associate	6.00	2,585.00	\$1,624,520.00
23-2011.00 Paralegal	1.00	255.00	\$75,480.00
		2	
Total this Page	7.00	2,840.00	\$1,900,000*
Grand Total	7.00	2,840.00	\$1,900,000*

* The \$1,900,000 contract value covers hourly fees attributed to partners, associates, and paralegals, as well as \$200,000 for vendor costs and other expenses.

Name of person who prepared this report: 25045 JC215
Title: Yann = Phone #: 912-859-8935
Preparer's Signature
Date Prepared: 10 2-7 17
. \ 1