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: NYS OFFICE OF CHILDREN AND FAMILY SERVICES State Agency Department ID: 3400000 Agency Business Unit: Contractor Name: WORLDWIDE TRAVEL STAFFING, LIMITED. Contract Number: C026921

Contract Start Date: 7/1/2018

Contract Number: C026921 Contract End Date: 10/31/2018

CFSOI	- 1	(02	6921	-	34000	00
0 501			10101		-1-	

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Temporany Nursing Service	s I	520	\$25,480
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	0.00	0.00	\$ 0.00
Grand Total	1	520	\$25,48

Name of person who prepared this report: LEO R. BLATZ, R.N., M.S.N.

Title: CHIEF EXECUTIVE OFFICER Preparer's Signature: Phone #: 866-633-3700

Date Prepared: 06/08/2018

(Use additional pages, if necessary)

Page 1 of 1