## 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: Department of Corrections and Community Supervision State Agency Department ID: 3250246 Contractor Name: Worldwide Travel Staffing Ltd. Contract Start Date: 2/10/2017

Agency Business Unit: DOC01 Contract Number: OP49013 Contract End Date: 3/31/2019

| Employment Category | Number of<br>Employees | Number of Hours<br>to be Worked | Amount Payable<br>Under the Contract |
|---------------------|------------------------|---------------------------------|--------------------------------------|
| L.P.N.              | 3.00                   | 2,244.00                        | \$123,420.00                         |
|                     | 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                            | \$0.00                               |
| Total this Page     | 3.00                   | 41,140.00                       | \$123,420.00                         |
| Grand Total         | 3.00                   | 41,140.00                       | \$123,420.00                         |

Name of person who prepared this report: Leo R. Blatz

Title: C.E.O.

Get Preparer's Signature: Date Prepared: 12/21/2018

Phone #: 866-633-3700

(Use additional pages, if necessary)

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