

CUG

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 OPWDD: Hudson Valley DDSOO  
 State Agency Department ID: 3660236 Agency Business Unit: 51210  
 Contractor Name: Worldwide Travel Staffing, Limited Contract Number: C0SHV00134  
 Contract Start Date: 5/1/2018 Contract End Date: 4/30/2023

| Employment Category | Number of Employees | Number of Hours to be Worked | Amount Payable Under the Contract |
|---------------------|---------------------|------------------------------|-----------------------------------|
| Hospital Sitter     | 2.00                | 300.00                       | \$11,133.26                       |
|                     | 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                            |
|                     | 0.00                | 0.00                         | \$0.00                            |
| Total this Page     | 2.00                | 300.00                       | \$11,133.26                       |
| <b>Grand Total</b>  | <b>2.00</b>         | <b>300.00</b>                | <b>\$11,133.26</b>                |

Name of person who prepared this report: Christina Palumbo

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Title: CMS I

Preparer's Signature: 

Date Prepared: 4/1/2018