## **FORM A**

OSC Use Only:
Reporting Code:
Category Code:

Date Contract Approved:

## New York State Education Department Agency Code: SED01

State Consultant Services - Contractor's Planned Employment From Contract Start Date Through The End Of The Contract Term

Contractor Name: DAVID L. KOFLON, PhD
Contract Number: 5013805
Contract Start Date: 12/1/2018 Contract End Date: 11/30/2023

Employment Category	Employment Title	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
19-3031.02	CLINICAL PSYCHOLOGIST	SELF		883652
	,			
Total this page				
Grand Total				8 83652

Name of person who prepared this report: DAVID L. Ka	PLON, Ph.D.			
Title: CHNICAL PSYCHOLDGIST	Phone #:845-323-6581			
Preparer's Signature: David & Koplon				
Date Prepared: )1 /20/18				