

**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: GOER	Agency Business Unit: OER01
State Agency Department ID: 1120000	Contract Number: C21005
Contractor Name: Developing Professionals	Contract End Date: 12/31/2026
Contract Start Date: 1/01/2022	

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Trainning & Development Specialist	1.00	2,000.00	\$300,000.00
13-1151.00	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	\$0.00
<b>Total this Page</b>	1.00	2,000.00	\$300,000.00
<b>Grand Total</b>	1.00	2,000.00	300,000

Name of person who prepared this report: Lori E. Miller

Title: Owner

Phone #: 716 681-9988

Preparer's Signature: 

Date Prepared: 12/16/2021