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: State Agency Department ID: Contractor Name: Hawkins Delafield & Wood LLP Contract Start Date: 10/01/2022

Agency Business Unit: Contract Number: C000446 Contract End Date: 9/30/2027

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Lawyers 23-1011.00	10.00	0.00	*\$1,500,000.00
	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	0.00	0.00	\$ 0.00
Grand Total			

Name of person who prepared this report: Eric P. Taylor

Title: Partner

En P. Tayle

Date Prepared: 11/3/2022

Preparer's Signature:

(Use additional pages, if necessary)

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