

FORM A

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

State Agency Name: Office of Temporary and Disability Assistance	
State Agency Department ID: 3050000	Agency Business Unit: OTDA01
Contractor Name: Industrial Medicine Associates, PC	Contract Number: C021964
Contract Start Date: upon approval	Contract End Date: 12/31/2021

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29-9099.00	20	107,606.46	\$3,851,378.25
Total this page	20	107,606.46	\$3,851,378.25
Grand Total	20	107,606.46	\$3,851,378.25

Name of person who prepared this report: **Clifford Gibberman**
 Title: **Director of Human Resources & Chief Compliance Officer** Phone #: **914.323.0313**

Preparer's Signature: _____

Date Prepared: **9.15.2017**

(Use additional pages, if necessary)