

D0H01- C033006 - 3450000

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: Health	Agency Business Unit:
State Agency Department ID: 12000	
Contractor Name: Transgender Equity Consulting, Inc.	Contract Number: C033006
Contract Start Date: 01/01/2019	Contract End Date: 12/31/2019

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Consultant	1.00	1,040.00	\$62,400
	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	1.00	1,040.00	\$62,400.00
Grand Total			

Name of person who prepared this report: Ilene Kane

Title: AIDS Program Representative II

Phone #: 518-474-6753

Preparer's Signature: Ilene Kane

Date Prepared: 06/17/2019