OSC Use Only:
Reporting Code:
Category Code:
Date Contract Approved:

FORM A

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

State Agency Name: NYS OPWDD Western NY Contract HUB Office	Agency Code: 51940/3660230
Contractor Name: New Hartford Psychiatric Services PLLC	Contract Number: C0SBR00235
Contract Start Date: 09/01/2019 Contract End Date: 08/31/2024	

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
31-1012.00	5	14,560	3,533,760.79
Total this page	0 5	0	
Grand Total			3,533,760.79

Name of person who prepared this report:

Title:

Phone #:

Preparer's Signature:

Date Prepared: //

(Use additional pages, if necessary)

7/11/19

Page