AC 3271-S (Effective 4/12)

FORM A

CUB

New York State Consultant Services
Contractor's Planned Employment
From Contract Start Date Through the End of the Contract Term

State Agency Name: NYS OPWDD: Sunmount DDSOO
State Agency Department ID: 3660240 | Agency Business Unit: 51420
Contractor Name: First Match Services, Inc. | Contract Number: C0SSU00183
Contract Start Date: 03/01/2019 | Contract End Date: 02/29/2024

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Physician	1.00	10,400.00	$1,548,560.01
	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	10,400.00	$1,548,560.01
Grand Total	1.00	10,400.00	$1,548,560.01

Name of person who prepared this report: Christina Palumbo

Title: CMS 1

Phone #: 845-877-6821 ext. 3704

Preparer's Signature: _____

Date Prepared: 01/07/2019

(Use additional pages, if necessary)