

**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: NYS OPWDD: Sunmount DDSOO  
 State Agency Department ID: 3660240 Agency Business Unit: 51420  
 Contractor Name: Paul Joseph Byron Contract Number: S0SSU00350  
 Contract Start Date: 12/1/2020 Contract End Date: 11/30/2025

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Physician	1.00	10,400.00	\$1,325,160.30
	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	10,400.00	\$1,325,160.30
<b>Grand Total</b>	1.00	10,400.00	\$1,325,160.30

Name of person who prepared this report: Zachary Guida

Title: Contract Management Specialist 1

Preparer's Signature: 

Date Prepared: 10/23/2020

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