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 Department of Health Agency Code: 12000

Contractor Name: Catskill Center for Independence Contract Number: C037221

Contract Start Date: 06/01/2022 Contract End Date: 05/31/2027

Franks, was not Catagon;	Number of	Number of hours	Amount Payable
Employment Category	Employees	to be worked	Under the Contract
47-4011.00	1	400	\$11,000
11-1011.00	1	200	\$9,000
43-6014.00	1	100	\$2,100
Total this page	3	700	\$22,100
Grand Total	3	700	\$22,100

Name of person who prepared this report: Meghan L. Staring

Title: Executive Director Phone #: 607.432.8000

Preparer's Signature: My harry Date Prepared: 04/22/2022

(Use additional pages, if necessary)

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