

**FORM A**

New York State Consultant Services <b>Contractor's Planned Employment</b> From Contract Start Date Through The End Of The Contract Term
---

State Agency Name: <b>Office of the State Comptroller</b>	
State Agency Department ID: 3050000	Agency Business Unit: OSC01
Contractor Name: EECS LLC	Contract Number: C001150
Contract Start Date: / /	Contract End Date: / /

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
13-2011.00 Accountants and Auditors	6	21,000	\$1,500,000.00
11-1011.00 Chief Executives	4	8,000	\$1,100,000.00
11-3012.00 Administrative Service Managers	1	2,000	\$80,000.00
<b>Total this page</b>	11	31,000	\$2,680,000.00
<b>Grand Total</b>	11	31,000	\$2,680,000.00

Name of person who prepared this report: Ashley Hamilton

Title: Contract Management Specialist 1

Phone #:

Preparer's Signature: 

Date Prepared: 08 / 10 / 2022

(Use additional pages, if necessary)