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: **Office of the State Comptroller**

State Agency Department ID: 3050000 | Agency Business Unit: OSC01

Contractor Name: Certified Management Consultants | Contract Number: C220002

Contract Start Date: | Contract End Date: / /

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29-1069.00 Physicians and Surgeons, All other	26	1250	
41-3099			
Sales Rep	1	110	
Office Admin			
43-3099	3	4625	
Total this page	0	0	$ 0.00
Grand Total			1,500,000.00

Name of person who prepared this report:

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Preparer's Signature:

Date Prepared: 10/17/2022

(Use additional pages, if necessary)

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