FORM A State Consultation Services - Contractor's Planned Employment

OSC Use Only:	
Reporting Code:	
Category Code:	
Date Contract Approved:	

FORM A

From Contract Start Date Through The End Of The Contract Term

State Agency Name: Office of Parks, Recreation & Historic Preservation	Agency Code: 49070
Contractor Name: Sik Prevention, Inc.	Contract Number:
Contract Start Date: / / Contract End Da	ate: / /

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Instructor 25-1043.00 A		1500	60,000
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Total this page	0	0	\$ 0.00
Grand Total	4	1500	60,000

Name of person who prepared this report:	Geonge	Sise	ں۔
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Title: owner

Preparer's Signature:

Date Prepared: 9/13/22

(Use additional pages, if necessary)

Phone #: 5/8-935-8678

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