

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 Children and Family Services
 State Agency Department ID: 3400000 Agency Business Unit: CFS01
 Contractor Name: Clinton County Contract Number: C029935
 Contract Start Date: 2/1/2024 Contract End Date: 1/31/2029

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Children's Services Program Specialist 11-9111.00	1.00	2,222.00	\$66,684.00
Administrative Assistant 43-6011.00	1.00	554.00	\$16,622.00
	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	2.00	2,776.00	\$83,306.00
Grand Total	2.00	2,776.00	\$83,306.00

Name of person who prepared this report: Jami Rock
 Title: Administrative Assistant
 Preparer's Signature: Jami Rock
 Date Prepared: 1/21/2024

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