

**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: County of Orange	Contract Number: C029937
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
CFRT Coordinator 11-9.111.00	1.00	4,411	\$75,000.00
	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
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
<b>Total this Page</b>	1.00	4,411.00	\$75,000.00
<b>Grand Total</b>	1.00	4,411	\$75,000.00

Name of person who prepared this report: Steve Valdez

Title: Deputy Commissioner of Health

Phone #: 845-360-6627

Preparer's Signature: 

Date Prepared: 1/2/2024