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

FORM A

State Consultant Services - Contractor's Planned Employment From Contract Start Date Through The End Of The Contract Term

State Agency Name: Defortment of Collections "Ind. Community Supervision Agency Code: 10160

Contractor Name: Gretchen A. Kupiccoller Duvi Court Reporting Contract Number: C-16/711

Contract Start Date: 01/01/2024 Contract End Date: 12/31/2028

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Employment Category	Number of	Number of hours to	Amount Payable Under the Contract
	2		
27-3092.00	ONE	14,440	4,601, 100.00
*Independent Contractors		TBD	
27-3092.00		unknown hours	
g dag og gy	3 8 8	number of	
	en i å	pages/fees	4,601,100.00
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Grand Total		Section of the sectio	, was in

Name of person who prepared this report: Gretchen A. Kupiec do Dur Cour Reporting
Title: OWNER Phone #: (315) 292 -4045

Preparer's Signature: Mitthen A Kypulc

Date Prepared: 11 /21/2023 (Use additional pages, if necessary)

Page of