

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: SUNY Cortland	Agency Business Unit: NA
State Agency Department ID: 28170	Contract Number: D000906
Contractor Name: HOLT Architects, PC	Contract End Date: 11/12/26
Contract Start Date: 11/13/2024	

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
11-1011.00	1.00	257.00	\$63,000.00
17-1011.00	1.00	1,244.00	\$168,000.00
17-3011.00	1.00	600.00	\$63,000.00
13-1051.00	1.00	840.00	\$126,000.00
Misc Consultants (TBD)	5.00	840.00	\$280,000.00
	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
Total this Page	9.00	3,781.00	\$700,000.00
Grand Total	9.00	3,781.00	\$700,000.00

Name of person who prepared this report: Allison L. Short

Title: Business Manager

Phone #: 607-273-7600

Preparer's Signature: 

Date Prepared: 2/14/2024

(Use additional pages, if necessary)

This form was completed prior to contracts being awarded under a term agreement and we have no way to know at this time who will be used under this agreement.