

**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: Workers' Compensation Board  
 State Agency Department ID: 3560000 Agency Business Unit: WCB01  
 Contractor Name: Panha Solutions Contract Number: PH68620  
 Contract Start Date: 8/1/2023 Contract End Date: 7/21/2025

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
15-1252-00	1.00	4,160.00	\$371,737.60
	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
Total this Page	1.00	4,160.00	\$371,737.60
<b>Grand Total</b>			

Name of person who prepared this report: Glenn Warnock

Title: CMS1

Phone #: 518-402-8169

Preparer's Signature: 

Date Prepared: 7/20/2023

(Use additional pages, if necessary)