

AC 3271-S (Effective 4/12)

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: Greycell Labs Contract Number: PH68912
 Contract Start Date: 2/5/2024 Contract End Date: 8/4/2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
15-1252-00	1.00	5,200.00	\$400,608.00
	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
Total this Page	1.00	5,200.00	\$400,608.00
Grand Total			

Name of person who prepared this report: Glenn Warnock

Title: CMS1

Phone #: 518-402-8169

Preparer's Signature: Glenn Warnock

Date Prepared: 1/19/2024