

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: NYS Dept. of Transportation
 State Agency Department ID: _____ Agency Business Unit: _____
 Contractor Name: Parsons Transportation Group of New York, Inc. Contract Number: D037615
 Contract Start Date: 11/1/2017 Contract End Date: 10/31/2022

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Civil Engineer 17.2051.00	30.00	54,000.00	\$6,974,000.00
Planner 19.3051.00	5.00	3,200.00	\$330,000.00
Admin 43.9199.99	4.00	1,000.00	\$68,000.00
Civil Eng. Tech 17.3022.00	4.00	500.00	\$48,000.00
Civil Drafter 17.3011.02	4.00	900.00	\$80,000.00
	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
Total this Page	47.00	59,600.00	\$7,500,000.00
Grand Total	47.00	59,600.00	\$7,500,000.00

Name of person who prepared this report: Howard Ungar

Title: Vice President

Phone #: 212-266-8573

Preparer's Signature:  _____

Date Prepared: 12/12/2017