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 PolyTechnic Institute
State Agency Department ID: 3320229 | Agency Business Unit: SNY01
Contractor Name: NP | Contract Number: C000100
Contract Start Date: 7/21/2017 | Contract End Date: 12/31/2018

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Partner	2.00	300.00	$150,000.00
Associate	3.00	800.00	$275,000.00
Paralegal	1.00	250.00	$50,000.00
	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
	0.00	0.00	$0.00
Total this Page	6.00	1,350.00	$475,000.00
Grand Total	6.00	1,350.00	$475,000.00

Name of person who prepared this report: Andrew C. Rose
Title: Partner | Phone #: 518-427-2664
Preparer's Signature: _____
Date Prepared: 8/ /2017

(Use additional pages, if necessary)