

**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: Office of Temporary and Disability  
 State Agency Department ID: 3050000 Agency Business Unit: OTDA0  
 Contractor Name: Freedom First Psychological Services, PLLC Contract Number: C021934  
 Contract Start Date: / / Contract End Date: 9 /30/2021

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Counseling Psychologist	1.00	40.00	\$75,000.00
	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
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
<b>Total this Page</b>	1.00	40.00	\$75,000.00
<b>Grand Total</b>	1.00	40.00	\$75,000.00

Name of person who prepared this report: Alicia Mahler

Title: Owner

Phone #: 518 560 4277

Preparer's Signature: 

Date Prepared: 12/13/2017