

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: Great Meadow Correctional Facility
 State Agency Department ID: _____ Agency Business Unit: _____
 Contractor Name: Worldwide Travel Staffing, Limited Contract Number: C040001
 Contract Start Date: 10/01/2018 Contract End Date: 03/31/2019

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Temporary Registered Nurses	2.00	2,080.00	\$139,360.00
	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	2.00	2,080.00	\$ 0.00
Grand Total	2.00	2,080.00	\$139,360.00

Name of person who prepared this report: Leo R. Blatz

Title: C.E.O.

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Preparer's Signature: Leo R Blatz

Date Prepared: 10/30/2018