OSC Use Only:	
Reporting Code:	
Category Code:	
Date Contract Approved:	

## FORM A

State Consultant Services - Contractor's Planned Employment From Contract Start Date Through The End Of The Contract Term

State Agency Name: NYS. OGS BRIM	Agency Code: OGSØ1	
Contractor Name: Sullivan-Herrandez dureny, INC.	Contract Number: Coo 3654	
Contract Start Date: / / Contract End Date:	11 24003	

O*Net Employment Category (see O*Net on-line at online.onetcenter.org)	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
13-2099,02	(1)	30 hrs	\$ 50,000 -
11-9199.02	(2)	28 hrs	\$ 50,000 -
	(2)	37,5 x2= 75has	\$,35000 x2= 70,00
41-3021,00	(Z) (MBE)	20 hrs.	\$ 50,000 - \$ 50,000 - \$,35,000 x2=70,00 \$ 30,000 -
N			
Total this page	0	0	# 100 pap\$ 0.00
Grand Total		· ·	\$200,000\$ 0.00 200,000\$

		200,000 30
Name of person who prepared to	nis report: YOLANNA Sullivan	
Title: C.E.O/	Cesidente Clarda Kulli	Phone #: (9/7) 833.3842
Preparer's Signature:	Clarda Vulli	
Date Prepared: (15/17) 2016	( ) ( ) ( )	

(Use additional pages, if necessary)

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