

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 the State Comptroller | |
| State Agency Department ID: 3050000 | Agency Business Unit: OSC01 |
| Contractor Name: Garnet River, LLC | Contract Number: C001012 |
| Contract Start Date: 07/13/2016 | Contract End Date: 07/12/2021 |

| Employment Category | Number of Employees | Number of hours to be worked | Amount Payable Under the Contract |
|------------------------|---------------------|------------------------------|-----------------------------------|
| 15-1199.02 | 1 | 10,432 | \$1,929,920.00 |
| 15-1199.09 | 1 | 10,432 | \$1,721,280.00 |
| 15-1131.00 | 1 | 10,432 | \$1,251,840.00 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total this page | 3 | 31,296 | \$4,903,040.00 |
| Grand Total | 3 | 31,296 | \$4,903,040.00 |

Name of person who prepared this report: Joseph M. Leatham

Title: Associate Budgeting Analyst

Phone #: (518) 474.5077

Preparer's Signature:



Date Prepared: 06/13/2016

(Use additional pages, if necessary)