

**FORM A**

New York State Consultant Services <b>Contractor's Planned Employment</b> From Contract Start Date Through The End Of The Contract Term
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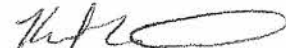
State Agency Name: <b>Office of the State Comptroller</b> <span style="float: right;">CN</span>	
State Agency Department ID: 3050000	Agency Business Unit: OSC01
Contractor Name: First Choice Evaluations, LLC	Contract Number: C001015
Contract Start Date: 1 / 1 <i>OSC Approval</i>	Contract End Date: 1 / 1 <i>year 3050000</i>

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Accountants	1	600	\$12,000
Bookkeeping, Accounting and Auditing Clerk	1	600	\$18,000
General and Operations Manager	2	2,000	\$170,000
Medical Records and Health Information Technicians	2	1,000	\$15,000
Office Clerks, General	2	370	\$6,600
Receptionists and Information Clerks	2	600	\$9,000
Financial Manager	1	468	\$23,400
<b>Total this page</b>	11	5,638	\$ 254,000
<b>Grand Total</b>	11	5,638	\$ 254,000

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Title: Contract Management Specialist 1

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Preparer's Signature: 

Date Prepared: 11/3/2016

(Use additional pages, if necessary)