

**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 Children and Family Services  
 State Agency Department ID: 3400000 Agency Business Unit: CFS01  
 Contractor Name: Yorkson Legal Contract Number: C028543  
 Contract Start Date: 8/1/2019 Contract End Date: 7/31/2020

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
23-1011.00	4.00	2,703.00	\$200,000.00
	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
Total this Page	4.00	2,703.00	\$200,000.00
<b>Grand Total</b>	<b>4.00</b>	<b>2,703.00</b>	<b>\$200,000.00</b>

Name of person who prepared this report:

Title:

Phone #:

Preparer's Signature: Michael Reichwald

Date Prepared: / / Aug 20, 2019

(Use additional pages, if necessary)

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