

**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: GOER  
 State Agency Department ID: 1120000 Agency Business Unit: OER01  
 Contractor Name: RM Robinson Solutions LLC Contract Number: C210010  
 Contract Start Date: 01/01/2022 Contract End Date: 12/31/2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Training and Development Specialist	1.00	1,333.00	\$300,000.00
13-1151.00	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
<b>Total this Page</b>	1.00	1,333.00	\$300,000.00
<b>Grand Total</b>	1.00	1,333.00	\$300,000.00

Name of person who prepared this report: Regina Robinson

Title: President

Phone #: 267-251-8326

Preparer's Signature: 

Date Prepared: 12/10/2021