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

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Agency Business Unit: OER01

Contractor Name: Watson & Associates,

Occupational Hygiene and Safety, LLC Contract Start Date: 01/01/2022

Contract Number: C210012 Contract End Date: 12/31/2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
11-1011	1.00	900.00	\$117,600.00
25-3099	4.00	3,840.00	\$153,600.00
43-9199	2.00	480.00	\$28,800.00
	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	7.00	5,220.00	\$300,000.00
Grand Total	7.00	5,220.00	\$300,000.00

Name of person when	no prepared this report: Paul Watson	n
Title: Owner		Phone #: 518-495-9151

Preparer's Signature:

Date Prepared: 11/29/2021