

**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:  
 New York State Governor's Office of Employee Relations (GOER)  
 State Agency Department ID: 1120000 Agency Business Unit: OER01  
 Contractor Name: Echoes Instructional Design, Inc. Contract Number: C21006  
 Contract Start Date: 1/1/2022 Contract End Date: 12/31/2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
13-1151.00 Training and Development Specialists	3.00	2000.00	\$300000.00
	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>	3.00	0.00	\$300,000.00
<b>Grand Total</b>			300000.00

Name of person who prepared this report: Kate T. Morris

Title: President/CEO

Phone #: 917-518-8272

Preparer's Signature: *Kate T. Morris*

Date Prepared: 12/17/2021