


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: Governor's Office of Employee Relations
 State Agency Department ID: 1120000 Agency Business Unit: OER01
 Contractor Name: John Paul Kowalchyk Contract Number: S21009
 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	1500.00	\$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
Total this Page	1.00	0.00	\$300,000.00
Grand Total	1.00	1,500.00	300000

Name of person who prepared this report: John Paul Kowalchyk
 Title: Consultant Phone #: 631-702-3498
 Preparer's Signature: 
 Date Prepared: 11/15/2021