

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: OPWDD	Agency Business Unit: OPD01
State Agency Department ID: 3660243	Contract Number: S0SCO0011
Contractor Name: Monica Ennis	Contract End Date: 03/31/2023
Contract Start Date: 04/01/2021	

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
21-1014	1.00	1,200.00	\$78,000.00
Total this Page			
Grand Total	1.00	1,200.00	\$78,000.00

Name of person who prepared this report: Monica M. Ennis
 Title: RN Consultant
 Preparer's Signature: Monica M. Ennis RN
 Date Prepared: 3/26/2021

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