

AC 3271-S (Effective 4/12)

FORM A

**New York State Consultant Services
Contractor's Planned Employment**
From Contract Start Date Through the End of the Contract Term

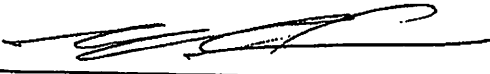
State Agency Name: ~~Temporary State Medical Staffing~~ OCFS
 State Agency Department ID: 3400000 Agency Business Unit: CFS01
 Contractor Name: The Caswood Group, Inc. Contract Number: #1128 6029908
 Contract Start Date: 9/1/2023 Contract End Date: 8/31/2028

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
RNs 29-1141.00	3.00	10,750.00	\$946,430.00
	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
Total this Page	3.00	10,750.00	\$946,430.00
Grand Total	3.00	10,750.00	\$946,430.00

Name of person who prepared this report: Mercedes Casamayor

Title: VP Operations

Phone #: (585)425-0332

Preparer's Signature: 

Date Prepared: 8/2/2023

(Use additional pages, if necessary)