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: Office of Children and Family Services

State Agency Department ID: 3400000

Contractor Name: Albany County Contract Start Date: 2/1/2024

Agency Business Unit: CFS01 Contract Number: C030031

Contract End Date: 1/31/2029

\$0.00	3,185	1.00	Grand Total
\$ 0.00	0.00	1.00	Total this Page
\$0.00	0.00	0.00	
\$0.00	0.00	0.00	
\$0.00	0.00	0.00	
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\$0.00	0.00	0.00	
\$0.00	0.00	0.00	
\$0.00	0.00	0.00	
\$0.00	3,185.00	1.00	CFRT Coordinator 11-9.111.00
Amount Payable Under the Contract	Number of Hours to be Worked	Number of Employees	Employment Category

Name of person who prepared this report: Ashanta Harris

Title: Supervisor A, CAC Coordinator, CFRT Corrdinator

Preparer's Signature:

Date Prepared: 07/31/2024

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