


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: NYS Office of Children and Family Services
State Agency Department ID: 3400000Agency Business Unit: CFS01
Contractor Name: Brad Beach DBTContract Number: C030072
Contract Start Date: 08/01/2024Contract End Date: 07/31/2025

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
25-3099.00	1.00	207.50	\$83,000.00
	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	1.00	207.50	\$83,000.00
Grand Total	1.00	207.50	\$83,000.00

Name of person who prepared this report: Love Beach
Title: COOPhone #: 310 428 3114
Preparer's Signature: 
Date Prepared: 4/25/2024 | 9:57 AM PDT

(Use additional pages, if necessary)