OSC Use Only:	
Reporting Code:	
Category Code:	
Date Contract Approved:	

of

## **FORM A**

State Consultant Services - Contractor's Planned Employment From Contract Start Date Through The End Of The Contract Term

State Agency Name: OCFS - BHS Agency Code:

Contractor Name: AYA HEALTHCARE INC Contract Number: PS69605

Contract Start Date: 6/18/2024 Contract End Date: 06/17/2026

Employment Category <sup>1</sup>	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Registered Nurses 29-1141.00	1	4360	\$446,000.00
		4160	\$416,000.00
		200	\$30,000.00
Total this page	0	4360	
Grand Total		4360	\$446,000.00

Name of person who prepared this report: Veronica Taylor

Title: CFSS 1 Phone #: 518-474-9560

Preparer's Signature: Veronica Taylor (CFSS1)

Date Prepared: 07/26/2024

(Use additional pages, if necessary) Page

<sup>1. (</sup>Note: Access the O\*NET database, which is available through the US Department of Labor's Employment and Training Administration, on-line at <a href="mailto:onetcenter.org">online.onetcenter.org</a> to find a list of occupations.)