

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: 3400000

Agency Business Unit: CFS01

Contractor Name: Craig Tessler

Contract Number: S010273

Contract Start Date: 03/01/2024

Contract End Date: 02/28/2029

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
23-1021.00	1.00	1,000	\$108,865
	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	1,000.00	\$108,865.00
<b>Grand Total</b>	<b>1</b>	<b>1,000</b>	<b>\$108,865</b>

Name of person who prepared this report: Craig Tessler

Title: Sole Proprietor

Phone #: 917 821 8900

Preparer's Signature: Craig Tessler

Date Prepared: 2/05/2024

(Use additional pages, if necessary)

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