

**FORM A**

<b>New York State Consultant Services</b> <b>Contractor's Planned Employment</b> From Contract Start Date Through the End of the Contract Term
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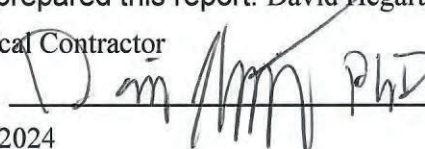
State Agency Name: OCFS State Agency Department ID: 3400000 Contractor Name: David Hegarty, Ph.D., LMFT Contract Start Date: 08/01/2024	Agency Business Unit: OCF01 Contract Number: S010286 Contract End Date: 7 /31/ 2029
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Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Mental Health Counselor 21-1023.00	1	800	\$394,625
	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
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	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	800	\$394,625
<b>Grand Total</b>	1	800	\$394,625

Name of person who prepared this report: David Hegarty, Ph.D., LMFT

Title: Independent Clinical Contractor

Phone #: 516-659-0022

Preparer's Signature: 

Date Prepared: 04/26/2024