

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: Division of the Budget | Agency Business Unit: DOB01 |
| State Agency Department ID: 1050000 | Contract Number: C000482 |
| Contractor Name: Frasca & Associates, LLC | Contract End Date: 05/31/2029 |
| Contract Start Date: 06/01/2024 | |

| Employment Category | Number of Employees | Number of Hours to be Worked | Amount Payable Under the Contract |
|---------------------|---------------------|------------------------------|-----------------------------------|
| 13-2051.00 | 8.00 | 1,300.00 | \$2,850,000.00 |
| | 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 |
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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 |
| Total this Page | 8.00 | 1,300.00 | \$2,850,000.00 |
| Grand Total | 8.00 | 1,300.00 | \$2,850,000.00 |

Name of person who prepared this report: Marvin Sun

Title: Principal

Phone #: 917-533-0025

Preparer's Signature: 

Date Prepared: 4/2/2024