

OSC Use Only:

Reporting Code:

Category Code:

Date Contract Approved:

FORM A

State Consultant Services - Contractor's Planned Employment

From Contract Start Date Through The End Of The Contract Term

State Agency Name: NYS Department of Health

Agency Code: 12000

Contractor Name: Fairbanks LLC

Contract Number: C040635

Contract Start Date: 01/01/2025

Contract End Date: 12/31/2029

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Chief Executives 11-1011.00	2	500	\$112,500.00
Project Management Specialists 13-1082.00	7	5,000	\$750,000.00
Business Intelligence Analysts 15-2051.01	2	2,000	\$200,000.00
Information Technology Project Manager 15-1299.09	1	595	\$113,000.00
Computer Programmer 15-1251.00	1	350	\$59,500.00
Administrative Service Manager 11-3012.00	1	350	\$35,000.00
Customer Service Representative 43-4051.00	3	1,500	\$120,000.00
Total this page	17	10,295	\$ 1,390,000.00
Grand Total	17	10,295	\$ 1,390,000.00

Name of person who prepared this report: Rosie Bonar

Title: Financial Controller

Phone #: 312-450-6351

Preparer's Signature: 

Date Prepared: 10/31/2024

(Use additional pages, if necessary)

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