

State Consultant Services Contractor's Planned Employment FORM A

OSC Use Only:

Reporting Code:

Category Code:

Date Contract Approved:

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 for People With Developmental Disabilities

State Agency Department ID: 3660243

Agency Business Unit: OPD01

Contractor Name: *Padilla & Co LLP*

Contract Number:

Contract Start Date: *5 years upon OSC approval*

Contract End Date: *5 years upon OSC approval*

Employment Category ¹	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
<i>Professional Services</i>	<i>TBD</i>	<i>NA</i>	<i>NA</i>
Total this page	0	0	
Grand Total			

Name of person who prepared this report: *KATHERINE LATARO*

Title: *Partner*

Phone #:

Preparer's Signature: *[Signature]*

Date Prepared: *11/8/2024*

(Use additional pages, if necessary)

Page of

1. (Note: Access the O*NET database, which is available through the US Department of Labor's Employment and Training Administration, on-line at <https://www.onetonline.org/> to find a list of occupations.