

AC 3271-S (Effective 4/12)

FORM A

<p align="center">New York State Consultant Services Contractor's Planned Employment From Contract Start Date Through the End of the Contract Term</p>

State Agency Name: Office of the State Comptroller	
State Agency Department ID: 3050000	Agency Business Unit: OSC01
Contractor Name: Adrienne Lawston	Contract Number: S024001
Contract Start Date: 9/1/2024	Contract End Date: 8/31/2029

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
23-1021.00 Hearing Officer	1	TBD	\$500,000.00
Total this page	1	TBD	\$500,000.00
Grand Total	1	TBD	\$500,000.00

Name of person who prepared this report: Adrienne LawstonTitle: Attorney at LawPhone #: 914 434 8040Preparer's Signature: Adrienne LawstonDate Prepared: 8/6/2024

(Use additional pages, if necessary)

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