

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:	
State Agency Department ID: SUNY Brockport	Agency Business Unit:
Contractor Name: Bell & Spina, Architects-Planners, PC	Contract Number: D211019
Contract Start Date: / /	Contract End Date: / /

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Partner, Building Enclosure Engineer	1.00	136.00	\$29,920.00
Project Manager	1.00	260.00	\$45,500.00
Building Enclosure Designer	1.00	360.00	\$45,000.00
	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
	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	3.00	756.00	\$ 120,420.00
Grand Total	3	756	\$120,420

Name of person who prepared this report:

Title: Vice President

Phone #: 315.488.0377

Preparer's Signature: 

Date Prepared: 12/13/2022

(Use additional pages, if necessary)

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