

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: Office of Children and Family Services
 State Agency Department ID: 3400000 Agency Business Unit: CFS01
 Contractor Name: MVP Consulting Plus, Contract Number: PH68617
 LLC.. Contract Start Date: 07/21/2025 Contract End Date: 07/20/2027

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Computer User Support Specialist 15-1232-00 Hourly Bill Rate: \$ 56.60	1.00	2,000.00	\$113,200.00
	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
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	1.00	2,000.00	\$113,200.00
Grand Total	1.00	2,000.00	\$113,200.00

Name of person who prepared this report: Shawntell E. Mills-Sanchez
 Title: IT Specialist - Mid-Level Phone #: 518-474-5569
 Preparer's Signature: *Shawntell E Mills-Sanchez*

_____ Date Prepared:
 07/16/2025

(Use additional pages, if necessary)