

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 (OCFS)		
State Agency Department ID:	3400000	Agency Business Unit:	CFSO1
Contractor Name:	Ronald Thesee	Contract Number:	SO10296
Contract Start Date:	6/1/2025	Contract End Date:	5/31/2028

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
29-1223.00	100	3,024.00	\$1,209,600
	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
	0.00	0.00	\$0.00
Total this Page	1.00	3,024.00	\$1,209,600.00
Grand Total self only	1.00	3,024.00	\$1,209,600.00

Name of person who prepared this report: Ronald These e
 Title: MD - Psychiatrist Phone #: (315) 941-2867
 Preparer's Signature: [Signature]
 Date Prepared: // 7/13/2025

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NYS OCFS

AUG 29 2025

**Bureau of
Contract Management**