

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: New York State Department of Transportation
 State Agency Department ID: 3900281 Agency Business Unit: DOT01
 Contractor Name: Stropp Appraisal Contract Number: C038179
 Contract Start Date: 01/01/2026 Contract End Date: 12/31/2028

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
13-2023.00	3.00	100.00	\$100,000.00
	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
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	3.00	100.00	\$100,000.00
Grand Total			

Name of person who prepared this report: Eriksen E Stropp
 Title: President Phone #: 315-436-0005
 Preparer's Signature: 
 Date Prepared: 09/21/2025