## 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: Department of Corrections and Community Supervision.

State Agency Department ID: 3250226 Agency Business Unit: DOC01
Contractor Name: The Osborne Association, Inc.
Contract Start Date: 04/01/2019 Contract End Date: 03/31/2020

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Family Center Supporting Staff - Greenhaven	3.00	1,248.00	\$15,134.00
Family Center Supporting Staff - Sullivan	3.00	1,872.00	\$22,310.00
	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	6.00	3,120.00	\$37,444.00
Grand Total			

Name of person who prepared this report: Amanda Dookie	
Title: Budget Analyst	Phone #: (718) 707-2664
Preparer's Signature: Amanda Dookie	
Date Prepared: 06/23/2021	