

**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: 3400302                      Agency Business Unit: CFS01  
 Contractor Name: Thomas Herden                              Contract Number: PH68613  
 Contract Start Date: 10/17/2023                              Contract End Date: 10/16/2025

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
15-2051.01	1.00	4,000.00	\$63.69
	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	4,000.00	\$ 63.69
<b>Grand Total</b>	1.00	4,000.00	\$254,760

Name of person who prepared this report: Julie Moessner

Title: Business Systems Analyst 3

Phone #: 518-473-3175

Preparer's Signature: Julie Moessner

Date Prepared: 10/4/2023