

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: NYS Office of Children and Family Services

State Agency Department ID: 3400000

Agency Business Unit: CFS01

Contractor Name: JSM Consulting

Contract Number: PH68612

Contract Start Date: 12/26/2023

Contract End Date: 12/25/2025

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
15-1252.00 Software Developers	1.00	4,000.00	\$329,080.00
■	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	\$329,080.00
Grand Total	1.00	4,000.00	\$329,080.00

Name of person who prepared this report: Kristin Fink

Title: IT Specialist 4

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Preparer's Signature: _____

Date Prepared: 12/20/2023

(Use additional pages, if necessary)