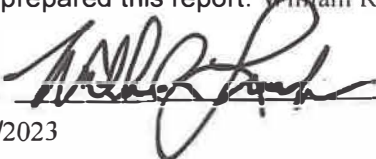


FORM A

**New York State Consultant Services
Contractor's Planned Employment**
From Contract Start Date Through the End of the Contract Term

State Agency Name: NYSDOCCS	Agency Business Unit: 10160
State Agency Department ID: 3250226	Contract Number: C161695
Contractor Name: Butler Snow LLP	Contract End Date: 03/31/2025
Contract Start Date: 04/01/2023	

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Attorney/Legal Services: 23-1011.00	8.00	TBD 0.00	\$481,957.35
	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	8.00	0.00	\$ 0.00
Grand Total	8.00	TBD 0.00	\$481,957.35

Name of person who prepared this report: William R. Lunsford
 Title: Partner
 Preparer's Signature: 
 Date Prepared: 06/27/2023
 Phone #: (256) 936-5609