OSC Use Only:
Reporting Code:
Category Code:
Date Contract Approved:

FORM A

State Consultant Services - Contractor's Planned Employment From Contract Start Date Through The End Of The Contract Term

State Agency Name: Green Haven CF
Agency Code: 3250224
Contractor Name: Maximum Healthcare
Contract Number:
Contract Start Date: [Contract Start Date] 4/1/2023
Contract End Date: [Contract End Date] 4/11/2024

Employment Category[1]	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29-1141.00	8	23,000	2,232,500.00
Total this page	0	0	
Grand Total			

Name of person who prepared this report:
Title: SMOS
Phone #: 845-221-2711 ext. 3211
Preparer's Signature: Kristen Bo
Date Prepared: 6/22/23
(Use additional pages, if necessary)

1. (Note: Access the O*NET database, which is available through the US Department of Labor's Employment and Training Administration, on-line at online.onetcenter.org to find a list of occupations.)