

EXAMPLE FORM A – click on fields to view associated notes

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
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State Agency Name: DOH	Agency Code: 3450000
Contractor Name: White Glove Placement, Inc	Contract Number: PS69677
Contract Start Date: 4/1/24	Contract End Date: 6/30/25

Employment Category ¹	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Registered Nurse-FT	1	2437.5	\$ 214,451.25
Registered Nurse-PT	1	975	\$85,780.5
Total this page	0	0	
Grand Total	2	3,412.5	\$300,231.75

Name of person who prepared this report: Paul Contarino
 Title: Health Program Administrator 1 Phone #: 518-486-6837
 Preparer's Signature: Paul Contarino *Paul Contarino*
 Date Prepared: 03/06/2024
 (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.)