

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: Department of State | Agency Business Unit: 00001 |
| State Agency Department ID: 380000 | Contract Number: C1002472 |
| Contractor Name: Barclay Damon LLP | Contract End Date: 3/31/2028 |
| Contract Start Date: 4/1/2023 | |

| Employment Category | Number of Employees | Number of Hours to be Worked | Amount Payable Under the Contract |
|-----------------------------|---------------------|------------------------------|-----------------------------------|
| Partner 23-1011.00 | 1.00 | 550.00 | \$165,000.00 |
| Senior Associate 23-1011.00 | 1.00 | 125.00 | \$31,250.00 |
| Associate 23-1011.00 | 1.00 | 85.00 | \$17,000.00 |
| Paralegal 23-2011.00 | 1.00 | 80.00 | \$9,600.00 |
| | 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 | 4.00 | 840.00 | \$222,850.00 |
| Grand Total | | | |

Name of person who prepared this report: Matthew J. Larkin

Title: Partner

Phone #: (315) 425-2805

Preparer's Signature: 

Date Prepared: 10/03/2023

(Use additional pages, if necessary)