## **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: Workers' Compensation Board

State Agency Department ID: 3560000 Agency Business Unit: WCB01
Contractor Name: PSI International Inc Contract Number: PH68621
Contract Start Date: 10/31/2023 Contract End Date: 10/30/2025

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
15-1252-00	1.00	4,160.00	\$301,600.00
	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
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	1.00	4,160.00	\$301,600.00
Grand Total			

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Title: CMS1 Phone #: 518-402-8169

Preparer's Signature: \_\_\_\_Glann Warnock

Date Prepared: 10/26/2023

(Use additional pages, if necessary)

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