


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: Western NYS Veterans Home
 State Agency Department ID: 3450240 Agency Business Unit: DOH01
 Contractor Name: SHC Services Inc Contract Number: C000046
 Contract Start Date: 08/22/2016 Contract End Date: 11/30/2016

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
RN	2.13	529.00	\$25,689.00
LPN	11.80	4,980.75	\$167,058.17
	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	13.93	5,509.75	\$212,747.17
Grand Total	13.93	5509.75	\$212,747.17

Name of person who prepared this report: Geoff Sherman
 Title: Manager of Client Services Phone #: (716) 541-2648
 Preparer's Signature: 
 Date Prepared: 2/7/17