

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: Department of Corrections & Community Supervision *DOC01-CC161447-3250226*
 Agency Code: 10160
 Contractor Name: Flexibility & Co., LLC dba FlexRN
 Contract Number: #CC161447
 Contract Start Date: 04/15/2018
 Contract End Date: 10/24/2022

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Temporary Personnel-Registered Nurse	TBD	56,160	\$3,593,453.76
Total this page	TBD	56,160	\$3,593,453.76
Grand Total	TBD	56,160	\$3,593,453.76

Name of person who prepared this report: Stephanie Berhalter

Title: Senior Administrative Coordinator

Phone #: 540-288-4056

Preparer's Signature: *Stephanie Berhalter*

Date Prepared: 04/23/2018

(Use additional pages, if necessary)