


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: OPWDD	Agency Business Unit: OPD01
State Agency Department ID: 3660240	Contract Number: S0SSU0033
Contractor Name: Andrew Walkow	Contract End Date: 08/31/2025
Contract Start Date: 09/01/2020	

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
29-1123.00 Physical Therapists	1.00	4247.30	\$361,021.23
	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
	0.00	0.00	\$0.00
Total this Page	1.00	0.00	\$361,021.23
Grand Total	1.00	4,247.30	\$361,021.23

Name of person who prepared this report: Andrew Walkow
 Title: Physical Therapist
 Preparer's Signature: 
 Date Prepared: 09/01/2020

Phone #: 518 524 8749