


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: NYS Office for People With Developmental Disabilities
 State Agency Department ID: 3660243 Agency Business Unit: OPD01
 Contractor Name: Ellen B. Kagen Contract Number: C0SC00068
 Contract Start Date: 9/1/22 Contract End Date: 922 Barracuda Cove Co

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Training and Development Consulting #1	1	99	\$37,125
Training and Development Consulting #2	1	11	\$4,125
Certified Trainer #1	1	89.87	\$33,700
Certified Trainer #2	1	36	\$13,500
Total this Page	2	235.87	\$88,450
Grand Total	2	235.87	\$88,450

Name of person who prepared this report:
 Title: Managing Consultant Phone #: (301) 651-9850
 Preparer's Signature: 
 Date Prepared: 10/30/2022