



State of New York
Department of Civil Service
 Albany, NY 12239

**State Consultant Services – Contractor’s Planned
 Employment From Contract Start Date Through End
 of Contract Term – “Form A”**

ADM-985 (1/07)

OSC Use Only:

Reporting Code:

Category Code:

Date Contract Approved:

State Agency Name:

Agency Code:

Contractor Name:

Contract Number:

Contract Start Date: / /

Contract End Date: / /

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Total this page			\$
Grand Total			\$