Upstate Medical University

3320211

EXHIBIT Y

FORM B

New York State Consultant Services Contractor's Annual Employment Repor

•	•	to March 31, 202	
Contracting State Agency Name: SUI Contract Number: C-504395 Contract Term: 11/01/2017 to 11/3 Contractor Name: CONTINUUM SYSTE Contractor Address: 2401 BURNITT & Description of Services Being Provide	30/ 2022 EMS EVERACUS		nit: SNY01 ID: 3320211
Scope of Contract (Choose one that be Analysis	search	•	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
SOPTWARE DEVELOPERS & SYSTEM SOPTWARE	2	118	\$49,764.00
			, ,
		-	, , , , , , , , , , , , , , , , , , ,
·			`
			•
	***		•
Total this Page	2 .	118	\$49,764.00
Grand Total	2	118	\$49,764.00
Name of person who prepared this re Title: PRESIDENT Preparer's Signature: Date Prepared: 04/07/2020	port: Robert		800-933-0180

05/19/2020 11:24 AM

AC 3272-S (Effective 4/12)

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2019 to March 31, 2020

Contraction State Agency None; Sta		Mana Vanla	
Contracting State Agency Name: Sta	ite University of I		'.
Contract Number: PH68621	Agency Business U		
Contract Term: 07/01/2019 to 06/	Agency Department	ID: 3320211	
Contractor Name: PSI International I			
Contractor Address: 11200 Waples N) Fairfax, ,VA 22030	
Description of Services Being Provid	ed: IT Services		•
Sanna of Cantroot (Change and that h			
Scope of Contract (Choose one that b	search 🔲 Tra	ining	
Data Processing Computer Pr	_	Other IT consulting	•
☐ Engineering ☐ Architect Services		•	Sanciose
) -		C Environmental	Services
- .		rel Dother Consul	tina
Accounting Auditing Pa	ralegal 🔲 Leç	gal Other Consul	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable - Under the Contract
Computer User Support Specialists	3	591.75	\$ 24,847.58
			· .
	1		
	 		
·			
•	<u> </u>		
	 		
			<u> </u>
	<u> </u>		<u> </u>
<u> </u>	<u> </u>	<u> </u>	
Tabelahia Dana	3	591.75	\$24,847.58
Total this Page			
Grand Total	3	591.75	\$24,847.58
Name of person who prepared this re	eport: Jasmin Beri		•
Title: Accountant	Lil	Phone #:	703.621.5849
Preparer's Signature:	at uy.s		
Date Prepared: 05/12/2020			
(Use additional pages if necessary)	•		Dana 4 a5 4
(USE additional pages If necessary)			Page 1 of 1

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2019 to March 31, 2020						
Contracting State Agency Name: SUNY Upstate Medical University Contract Number: T-504906 Contract Term: Oct. 1, 2019 to Sept. 30, 2020 Contractor Name: Digital Hyve Marketing LLC Contractor Address: 126 N. Salina Street, Ste. 500, Syracuse, NY 13202 Description of Services Being Provided Marketing Marketing						
Scope of Contract (Choose one that best fits): Analysis						
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
Marketing Managers	17	65.7	\$30,000			
Total this page	. 17	65.7	\$30,000			
Grand Total	17	65.7	\$30,000			
Name of person who prepared this rep Preparer's Signature: Title: VP of Operations Date Prepared: 05/12/2020 Use additional pages if pecessary)	ort: Sarah Mastrangelo	Phone #:315-412-0	988			
Use additional pages if necessary) Page of						

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2019 to March 31, 2020

Contracting State Agency Name: SUNY Upstate Medical University

Agency Code:

332021

Contract Number:

T550086

Contract Term:

1/7/2013

to 6/30/20

Contractor Name: Fis

Fisher Associates, P.E., L.S., L.A., D.P.C.

Contractor Address: 180 Charlotte Street, Rochester, NY 14607

Description of Services Being Provided: Campus Site Improvements at Upstate Medical University and

Community General Hospital Campus

Scope of Contract (Choose one that best fits):
Analysis □ Evaluation □ Research □ Training □
Data Processing □ Computer Programming □ Other IT Consulting □
Engineering ☑ Architect Services □ Surveying □ Environmental Services □
Health Services □ Mental Health Services □
Accounting □ Auditing □ Paralegal □ Legal □ Other Consulting □

Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
17-2071.00 Electrical Engineers	1	15.00	\$2,016.65	
17-3012.02 Electrical Drafters				
17-3023.03 Electrical Engineering Technicians	1	505.00	\$413.35	
173011.01 Landscape Drafters		`		
17-1012.00 Landscape Architects	1	25.75	\$2,519.38	
17-2051.00 Civil Engineer	1	74.00	\$6,127.20	
27-1024.00 Graphic Designer				
17-3019.00 Drafters, All Others				
17-3022.00 Civil Engineering Technicians				
			<u> </u>	
		- "		
			-	
Total this page	4	619.75	\$11,076.58	
Grand Total	4	619.75	\$11,076.58	

Name of person who prepared this report:	Catherine M. DiMarco
Preparer's Signature: Catherine M. Di Marco	
Title: Accountant	Phone #: 585-334-1310
Date Prepared: April 30, 2020	

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2019 to March 31, 2020

Contracting Stat	e Agency Na	ne: Upstate	Medical - E	meraency De	partment Psych
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Renovations at Community Campus

Contract Number: T550183

Agency Business Unit:

Contract Term: 02/20/2017 to 5/30/2020

Agency Department ID:

Contractor Name: HOLT Architects, P.C.

Contractor Address: 619 W State Street, Ithaca NY 14850

Description of Services Being Provided: Architectural Design and Consultants

Scope of Contract (Choose one that be	est fits):							
☐ Analysis ☐ Evaluation ☐ Research ☐ Training								
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting								
☐ Health Services ☐ Mental Health Services								
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	ai	ting					
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract								
17-1011	1.00	1.50	\$133.38					
11-9041	1.00	103.25	\$13,424.33					
17-3011	2.00	118.00	\$10,125.79					
17-2051	1.00	1.00	\$49.00					
17-3022	1.00	1.00	\$34.00					
19-2041	2.00	9.00	\$747.00					
17-2141	3.00	78.00	\$7,477.72					
17-3013	1.00	3.00	\$184.74					
17-2071	2.00	25.00	\$1,934.49					
17-3012.02	2.00	38.00	\$2,205.32					
			\$0.00					
Total this Page	16.00	377.75	\$36,315.77					
Grand Total 16.00 377 \$36,315.7								

Na	me	of	person v	who	prepar	red this	report:	Allison)L.	Short
----	----	----	----------	-----	--------	----------	---------	------------	-------

Title: Business Manager

Preparer's Signature: Date Prepared: 05/11/2020 Phone #: 607-273-7600

(Use additional pages, if necessary)

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OSC Use Only:	· -	
Reporting Code:		
Category Code:		

Report Period: April 1, 2019 to March 31, 2020			
Contracting State Agency Name: Contract Number: T550205 Contract Term: 10/24/2016 to Contractor Name: HOLT Architect Contractor Address: 619 W State Description of Services Being Prov Programming, space planning and Weiskotten Hall Additions	s, P.C. Street, Ithaca NY 1 ided: Architectural a	4850 and Engineering Servi	
Data Processing ☐ Computer Prog Engineering ☑ Architect Services Health Services ☐ Mental Health S	arch ☐ Training ☐ gramming ☐ Othe ☑ Surveying ☐ tervices ☐] r IT consulting Environmental Service Other Consulting	es 🗌
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
17-3011	1	25.75	1,492.47
11-9041	1	38.00	4,272.74
17-1011	1	113.50	10,590.65
Total this page	3	177.25	16,355.86
Grand Total	3	177.25	16,355.86
Name of person who prepared this Preparer's Signature: Title: Business Manager Date Prepared: 5/11/20		hort one #: 607-273-7600 I	

Use additional pages if necessary)

Page 1 of 1

FORM B		OSC Use O	mly:	
·		i i	Réporting Code:	
		Calegory Co	ode:	
	State Consultant S	ervices		
Cont	tractor's Annual Empl			
Report	Period: April 1, 2019	to March 31, 2020	·	
<u> </u>				
Contracting State Agency Nam Contract Number: T550259 Contract Term: 10/24/2018 to Contractor Name: M/E Engine Contractor Address: 300 Trolle	0 01/24/2020 pering, PC		ancy Code: 3340	
Description of Services Being			g Engineering	
Data Processing ☐ Computer Engineering ☒ Architect Servi Health Services ☐ Mental Hea	tesearch	r IT consulting 🔲	es 🗖	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
17-2141.00	2	71.50	\$8,607.94	
19-2041.00		2.00	\$814.00	
-				
7-1-1-1		72.50	\$0.404.04	
Total this page	3	73.50 73.50	\$9,421.94 \$9,421.94	
Grand Total			40,72 1.07	
Name of person who prepared Preparer's Signature: <u>Gassic</u>		Cucinotta 	:	
Title: Accounting Representation Date Prepared: 05/14/2020		one #: (585) 288-5590	,	
(Use additional pages if necessary	<i>(</i>)	•	Page 1 of 1	

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н	_	u	к	IVI	

OSC Use Only:	-	
Reporting Code:		
Category Code:		

Report Period: April 1, 2019 to March 31, 2020

Contracting State Agency Name: SUNY UMU

Agency Code:

33202 (

Contract Number: T550260 Contract Term: 12/19/18 -

Contractor Name: HOLT Architects, PC

Contractor Address: 619 W State Street Ithaca NY 14850

Description of Services Being Provided: SUNYUMUCancer – Cancer Center at Community

Scope of Contract (Choose one that best fits): Analysis				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
13-1051	1	74.75	7,515.77	
17-1011	1	237.50	38,019.00	
17-3011	2	1,079.00	59,395.37	
11-1011	1	14.50	3,016.01	
11-9041	1	10.75	1,202.53	
47-4011	1	2.00	241.51	
43-6014	3	111.00	7,046.28	
11-9041	1	235.00	43,780.50	
17-2141	1	163.00	21,720.21	
17-2111.02	1	201.00	13,869.00	
27-1029	2	280.00	22,619.86	
17-3019	2	394.50	24,607.33	
17-2081	1	11.50	1,092.50	
Total this page	18	2,814.50	244,125.87	
Grand Total			· · · · · · · · · · · · · · · · · · ·	

Name of person who prepared Preparer's Signature:	this report: Allison of Short
Title: Business Manager	Phone #: 607-273-7600 Ext. 155
Date Prepared: 5/11/20	

Use additional pages if necessary)

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	17	141	

OSC Use Only:	
Reporting Code:	
Category Code:	

	State Consultant Se		
	tor's Annual Emplo	•	
Report Fer	riod: April 1, 2019 t	0 Warch 31, 2020	
Contracting State Agency Name: Contract Number: 550260 Contract Term: 12/19/18 - Contractor Name: HOLT Architect Contractor Address: 619 W State Description of Services Being Prov	s, PC Street Ithaca NY 14	1850	S32021
Data Processing ☐ Computer Prog Engineering ☑ Architect Services Health Services ☐ Mental Health S	arch	r IT consulting ☐ Environmental Servic	es ⊠
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-9011	2	15.50	930.00
17-3011	1	1.00	50.00
		-	
Total this page	3	16.50	980.00
Grand Total	21	2,831.00	245,105.87
Name of person who prepared this Preparer's Signature: Title: Business Manager Date Prepared: 5/11/20	soil one	hort one #: 607-273-7600 I	Ext. 155

Use additional pages if necessary)

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OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1, 2019 to March 31, 2020

Contracting State Agency Name: SUNY UMU	Agency Code:
Contract Number: T550262	332011
Contract Term: 1/16/19 -	3300FU

Contract Number: T550262

Contract Term: 1/16/19 -

Contractor Name: HOLT Architects, PC

Contractor Address: 619 W State Street Ithaca NY 14850

Description of Services Being Provided: SUNY UMU 4W Inpatient Unit - Refresh 4 West

Inpatient Unit Community Campus at Upstate Medical University

Scope of Contract (Choose one that best fits): Analysis						
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
17-3011	2	510.50	33,231.03			
13-1051	1	16.00	1,613.52			
11-1011	1	24.50	5,100.59			
43-6014	3	70.00	4,443.60			
11-9041	1	72.50	13,506.75			
17-2141	1	17.00	2,265.30			
17-2071	_1	6.00	1,117.80			
27-1029	2	53.00	4,281.62			
17-3019	2	126.00	7,859.38			
17*2081	1	7.50	712.50			
29-9011	2	18.00	1,080.00			
		-				
Total this page 17 921.00 75,212.09						
Crand Total						

Name of person who prepared this	s report: Willison W. Short
Preparer's Signature:	DIY! / S ONW)
Title: Business Manager	Phone #: 607-273-7600 Ext. 155
Date Prepared: 5/11/20	

Exhibit Y		OSCI	se Only:	
		Reporti	Reporting Code:	
FORM B		Catego	y Code:	
	State Consultant Se	rvices	· · · · · · · · · · · · · · · · · · ·	
Contrac	ctor's Annual Emplo			
	ried: April 1, 2019 to	· •	 	
Contracting State Agency Name :SUN	Y Upstate Medical L	Iniversity Agen	cy Code:	
Contract Number: <u>T550266 (151067/1</u>	112.31 UUH 3W Ang	io Suites Reno (18-0:	33707[[
Contract Term: 03/20/2019 to			- 4	
Contractor Name: <u>Dwyer Architecture</u> Contractor Address: <u>120 P. Washingt</u>		vracues NV 13202		
Description of Services Being Provide				
Scope of Contract (Choose one that		٠ ا		
Analysis Devaluation Data Processing Devaluation	on [] Resea Computer Programm	· · · · =	Training []	
Engineering Architect Serv			onmental Services	
Health Services		alth Services		
Accounting Auditing	Paralegal 🗌	Legal 🗌	Other Consulting	
	Number of	Number of Hours	Amount Payable	
Employment Category	Employees	Worked	Under the Contract	
17-1011.00 Architects, Except Landscape and Naval (Dwyer)	2.00	213.50	\$20,900.00	
17-3011.01 Architectural Drafters (Dwyer)	2,00	269.50	\$7,450.00	
43-5014.00 Secretaries & Admin				
Assistants, Except Lega, Medical and Executive (Dwyer)	2,00	34.75	\$1,449.00	
				
			+	
·				
Total this page	6.00	517.75	\$29,799.00	
Grand Total				
Name of person who prepared this report: Kristen Zdrojewski				
Preparer's Signature:			" ·	
Title: Office Manager		Phone #: 315.473	1800	
Date Prepared: 04/15/2020)	4 (1011- 11) - 101719	<u> </u>	
	•			
Use additional pages if necessary)			Page I of 4	

Exhibit Y		OSC Use			
FORM B		Reportin Category			
	State Consultant Services				
	ctor's Annual Emplo	•			
Report Per	riod: April 1, 2019 t	o March 31, 2020			
Contracting State Agency Name :SUN	IV I Instate Medical I	Independent Acons	Code:		
Contract Number: <u>T550266 (151067/1</u>	112.3) UUH 3W Ang	to Suites Reno (18-05)	339071		
Contract Term: 03/20/2019 to			q		
Contractor Name: IBC Engineering P.	.C		·		
Contractor Address: 3445 Winton Pl & Description of Services Being Provide					
Description of Selvices Denig Provide	a Merit engineer	111 <u>K</u>			
Scope of Contract (Choose one that		. 🗖	m -t-1		
Analysis Devaluation Evaluation Data Processing	on 🔲 Resea Computer Programm		Training [] IT consulting []		
Engineering Architect Servi			nmental Services		
Health Services		ealth Services			
Accounting Auditing	Paralegal 🔲		Other Consulting [
		· · · · · · · · · · · · · · · · · · ·			
Employment Category	Number of	Number of Hours	Amount Payable		
17-2141.00 Mechanical Engineer (IBC)	Employees 3.00	Worked 278	Under the Contract 29,800		
17-3023.00 Electrical Engineer (IBC)	1.00	124	14,395		
17-3013.00 Mechanical Drafter (IBC)	2.00	100	6096		
11-1021.00 General Operational	1.00	26	5160		
Manager (IBC) 11-1011 Chief Executive Office (IBC)	1.00	36 15	5160 2790		
17-3012.02 Electrical Drafter (IBC)	1.00	56	4200		
			1-44		
<u> </u>					
<u> </u>	,				
Total this page					
Grand Total	9	609	63,441		
Name of person who prepared this report: Andrew Jarosz					
Preparer's Signature:					
Title: Associate		Phone #: <u>585-292</u> -1	590		
Date Prepared: <u>5 / 5 / 2020</u>		<u>-</u>			
I les additional noges if necessary			Dage of		

Exhibit Y FORM B	OSC Use Reporting Category	Code:			
State Consultant Services Contractor's Annual Employment Report					
ſ	iod: April 1, 2019 to	<u>-</u>			
Contracting State Agency Name: SUN Contract Number: T550266 (151067/1 Contract Term: 03/20/2019 to Contractor Name: Trophy Point, LLC Contractor Address: 4588 South Park Description of Services Being Provided	112.3) UUH 3W Ang 10/19/2020 Avenue, Blasdell, N	rio Suites Reno (18-058	332021		
Scope of Contract (Choose one that I Analysis	on Resca Computer Programm ces Surve Mental He	ing Other ving Enviror ealth Services	Training IT consulting Immental Services Other Consulting		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
13-1051.00 Cost Estimators (Trophy Point)	4.00	43.5	\$6,434		
Total this page	4	43.5	6,434		
Grand Total	4	43.5	6,434		
Name of person who prepared this report Preparer's Signature: Richard M. Gudojii	ort: <u>Richard Chudzik</u>		· .		
Title: President Date Prepared: 04/16/2020		Phone #: 716-823-0	006		
Use additional pages if necessary)		•	Page 1 of 1		

Exhibit Y FORM B		Rep	C Use Only: porting Code: egory Code:		
State Consultant Services Contractor's Annual Employment Report					
	Report Period: Ap				
গাঁওঁ) ১০১৩ ডিজনত স্বাণিত্য পুঁজি গুণিও	જા <mark>તું પ્ર</mark> ાપ્ત અને ત્યુપાર્ટન હતો છતો. -	ANGSTON WHATER TO PERSONAL TOWNS	6		
Exhibit Y FORM B		· Re	SC Use Only: porting Code:		
TOTAL D	S4-4- 5		tegory Code:		
		Consultant Services nnual Employment Report			
	Report Period: Ap	oril 1, 2019 to March 31, 2020			
Contracting State Agency Name : Contract Number: <u>T550268 (1510</u>	SUNY Upstate Medic 67/1112.2) Radiology	al University A Comm Campus(18-059)	Agency Code: 33/07 [
Contract Term: 04/25/2019 Contractor Name: Dwysr Archite Contractor Address: 120 E. Wash Description of Services Being Pro	ington Street. Suite 82		=		
Scope of Contract (Choose one to Analysis Description Evaluate Data Processing Description Architect Services Description Desc	lon ☐ Computer		Training her IT consulting nvironmental Services		
Accounting Auditing	Paralegai		Other Consulting		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
17-1011.00 Architects, Except Landscape and Naval (Dwyer)	1.00	35.00	\$5,230.70		
17-3011.01 Architectural Drafters (Dwyer)	2.00	110.50	\$5,084.13		
43-6014.00 Secretaries & Admin Assistants, Except Lega, Medical and Executive (Dwyer)	1.00	14.75	\$854.91		
11-9041.00 Architectural & Engineering Managers (Dwyer)	1.00	1.00	\$144.90		
	 				
					

Exhibit Y FORM.B			se Only: 1g Code: y Code:
	Contractor's A	onsultant Services nnual Employment Report ril 1, 2019 to March 31, 2020	: •
Contracting State Agency Name: Contract Number: T550268 (15106) Contract Term: 04/25/2019 Contractor Name: Dwyer Architector Address: 120 E. Washi Description of Services Being Provinces	57/1112.2) Radiology (to04/24/2021 ctural, LLC ngton Street, Suite 82	Comm Campus(18-059) 2 Syracuse NY 13202	33202((
Scope of Contract (Choose one the Analysis	on ☐ Computer l ices ⊠	Surveying Enviro	Training Consulting nmental Services Other Consulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
17-1011.00 Architects, Except Landscape and Naval (Dwyer)	1.00	35.00	\$5,230.70
17-3011.01 Architectural Drafters (Dwyer)	2.00	110.50	\$6,084.13
43-6014.00 Secretaries & Admin Assistants, Except Lega, Medical and Executive (Dwyer)	1.00	14.75	\$854.91
11-9041.00 Architectural & Engineering Managers (Dwyer)	1.00	1.00	\$144,90
Total this page Grand Total	5.00		\$12,314.84
Name of person who prepared this Preparer's Signature: Title: Office Manager Date Prepared: 04/15/2020 Use additional pages if necessary)	report: Kristen Zdroji	Phone #: <u>315.473.1800</u>	Page 1 of 1

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OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1, 2019 to March 31, 2020

Contracting State Agency Name:	SUNY UMU	Age	ncy Code: 2814
Contract Number: PO #956014			33202 V
Contract Term: 9/4/19 -	- DO		33000 4
Contractor Name: HOLT Architect	•	4050	•
Contractor Address: 619 W State			(
Description of Services Being Prov			utchings
Psychiatric Center Building TU 4 (Inange of Occupanc	;y	
		·	
Scope of Contract (Choose one that	t best fits):		
, , — —	arch 🔲 🔝 Training 🗀		
Data Processing Computer Prog		r IT consulting	
Engineering Architect Services		Environmental Service	es ⊠
Health Services Mental Health S		011 0 0 111 11	
Accounting Auditing Paral	legal 🗌 Legal 🗍	Other Consulting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
11-1011	1	14.00	2,912.01
17-1011	1	45.50	4,801.63
17-3011	1_	3.50	269.36
17-2141	1	20.50	2,355.00
17-3013	1	23.00	2,645.00
	<u></u>		
			
Tatal this near		100.50	12 092 00
Total this page	5	106.50	12,983.00
Grand Total	5_	106.50	12,983.00
Name of person who prepared this	report Allison L. S	hort	
Preparer's Signature: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			

Date Prepared: 5/11/20

Phone #: 607-273-7600 Ext. 155

F	O	R	М	В

OSC Use Only:	
Reporting Code:	
Category Code:	

Report	Period: April 1, 2019 t	o March 31, 2020	
Contracting State Agency Nan	ne: SUNY LIMIT	Ane	ncy Code:
Contract Number: PO #956023	Agency Code:		
Contract Term: 9/27/19 -			3320211
Contractor Name: HOLT Arch			
Contractor Address: 619 W S			
Description of Services Being			- Feasibility
Study for Adult Ed Airborne In	nfection Isolation Room		
	· · · · · · · · · · · · · · · · · · ·		
Scope of Contract (Choose one	that best fits):		
Analysis Evaluation F	Research 🔲 🏻 Training 🗀]	
· · · · · · · · · · · · · · · · ·		r IT consulting 🔲	
Engineering Architect Ser		Environmental Service	ces 🛛
	alth Services	o., o	
Accounting Auditing F	Paralegal Legal	Other Consulting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
11-1011	1	8.00	1,664.01
17-3011	1	24.25	1,881.99
17-2141	2	4.00	448.27
11-9041	1	16.50	2,675.85
17-2071		2.00	318.02
43-9199	2	2.00	175.84
Total this page	8	56.75	7,163.98
Grand Total	. 8	56,75	7,163.98
· · · · · · · · · · · · · · · · · · ·		 	
Name of person who prepared	this report Allison L. S	H ort	
Preparer's Signature:	using or lon	Λ	
Title: Business Manager	Pho	one #: 607-273-7600 l	Ext. 155
Date Prepared: 5/11/20			

Use additional pages if necessary)

FO	R	M	R

OSC Use Only:	
Reporting Code:	
Category Code:	

State Consultant Services Contractor's Annual Employment Report							
Report Period: April 1, 2019 to March 31, 2020							
Kepoit i ei	10d. April 1, 2015 t	O Midicii O I, 2020					
Contracting State Agency Name: SUNY Upstate Agency Code: Contract Number: PO 956103 Contract Term: 3/23/2020 Contractor Name: HOLT Architects, PC Contractor Address: 619 W State Street Ithaca NY 14850 Description of Services Being Provided: SUNY UMU Gynological Oncology Renovation – Gyn/Oncology Madison Irving							
Scope of Contract (Choose one that best fits): Analysis							
Employment Category Number of Employees Number of Hours Worked the Contract Amount Payable Under the Contract							
17-3011 11-9041	1	17.00 1.25	1,480.00 162.50				
Total this page	3	18.25	\$1,642.50				
Total this page 3 18.25 \$1,6 Grand Total 3 18.25 \$1,6							
0 0 0							
Name of person who prepared this report. Allison L. Short Preparer's Signature:							
Title: Business Manager Phone #: 607-273-7600 Ext. 155							
Date Prepared: 5/11/20							

FORM B

OSC Use Only:	
Reporting Code:	
Category Code:	

Report Period: April 1, 2019 to March 31, 2020

Contracting State Agency Name: SUNY UMU	Agency Code:
Contract Number: 550281	September 1
Contract Term: 12/13/19 -	332011
Contractor Name: HOLT Architects, PC	
Contractor Address: 619 W State Street Ithaca NY 14850	
Description of Services Being Provided: SUNY UMU Hyperb	aric Expansion – Hyperbaric and
Wound Care Clinic Expansion	
Would Care Cities Expansion	

Scope of Contract (Choose one that best fits): Analysis						
Employment Category Number of Employees Number of Hours Worked Amount Payable Under the Contract						
19-2041 3 33.5 \$4,410.00						
19-4091 1 11.5 \$1,687.50						
17-3011 3 380.50 \$22,896.78						
17-1011 1 36.00 \$3,97						
11-1011	1	12.00	\$2,550.95			
11-9041	1	3.50	\$560.28			
17-2141	2	58.00	\$6,511.06			
11-9041	1	30.00	\$4,860.96			
17-2071	1	26.00	4,093.11			
17-3013	1	1.50	91.95			
17-3027	1	38.50	2,198.35			
Total this page	13.00	631.00	5\$3,838.19			
Grand Total 13.00 631.00 \$53,838.19						

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Name of person who prepared this reper Preparer's Signature:	Ar Y	lison VU	Short
Title: Business Manager			Phone #: 607-273-7600 Ext. 155
Date Prepared: 5/11/20	 		