

# **SUNY System Administration**

**3320241**

**FORM B**

**New York State Consultant Services  
Contractor's Annual Employment Report**  
Report Period: April 1, 2017 to March 31, 2018

Contracting State Agency Name: SUNY System Administration  
 Contract Number: C003109 Agency Business Unit: SNY01  
 Contract Term: 10/01/2017 to 09/30/2022 Agency Department ID: 3320241  
 Contractor Name: FLUENT CONSULTING CORPORATION  
 Contractor Address: 325 Delaware Avenue, Suite 210, Buffalo, New York 14202  
 Description of Services Being Provided: Wholesale Electricity Procurement & Consulting Services

**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 |
|---|---------------------|------------------------|-----------------------------------|
| 15-1132.00 Software Architect             | 0.34                | 18.00                  | \$1,763.73                        |
| 15-1196.06 Database Architect             | 0.33                | 17.40                  | \$1,704.94                        |
| 15-1134.00 Web Developer                  | 0.33                | 17.40                  | \$1,704.94                        |
| 15-1131.00 Programmer Analyst             | 1.00                | 52.80                  | \$5,173.60                        |
| 17-2199.03 Energy Engineer                | 2.50                | 132.00                 | \$12,934.01                       |
| 13-1199.00 Business Operations Specialist | 1.00                | 52.80                  | \$5,173.60                        |
| 11-1021.00 Operations Manager             | 0.50                | 26.40                  | \$2,586.81                        |
| 13-1161.00 Project Manager                | 1.00                | 52.80                  | \$5,173.60                        |
| 43-9199.00 Office Administrator           | 1.00                | 52.80                  | \$5,173.60                        |
| 13-2011.01 Staff Accountant               | 1.00                | 20.70                  | \$2,028.29                        |
|   | 0.00                | 0.00                   | \$0.00                            |
|   | 0.00                | 0.00                   | \$0.00                            |
|   | 0.00                | 0.00                   | \$0.00                            |
| <b>Total this Page</b>                    | <b>9.00</b>         | <b>443.10</b>          | <b>\$43,417.12</b>                |
| <b>Grand Total</b>                        | <b>9.00</b>         | <b>443</b>             | <b>\$43,417.12</b>                |

Name of person who prepared this report: Michael J. Mastroianni

Phone #: (716) 842-1710 Ext. 200

Title: President

Preparer's Signature: Michael J. Mastroianni

Date Prepared: 05/07/2018

**FORM B**

**New York State Consultant Services  
Contractor's Annual Employment Report**  
Report Period: April 1, 2017 to March 31, 2018

Contracting State Agency Name: SUNY System Administration  
 Contract Number: CM02889 Agency Business Unit: SNY01  
 Contract Term: 03/18/2016 to 03/17/2018 Agency Department ID: 3320241  
 Contractor Name: OutSolve, LLC  
 Contractor Address: 3330 W. Esplanade Ave. S, Ste 301, Metairie, LA 70002  
 Description of Services Being Provided: Affirmative Action Plans

**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 |
|------------------------|---------------------|------------------------|-----------------------------------|
| 13-1071.00             | 1.00                | 83.00                  | \$34,450.00                       |
|                        | 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                            |
| <b>Total this Page</b> | 1.00                | 83.00                  | \$34,450.00                       |
| <b>Grand Total</b>     |                     |                        |                                   |

Name of person who prepared this report: Baldwin Read

Title: Chief Administrative Officer

Phone #: 504-486-2410

Preparer's Signature: 

Date Prepared: 05/15/2018

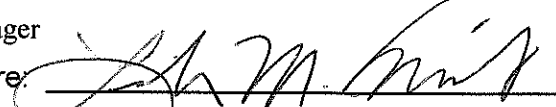
**FORM B**

**New York State Consultant Services  
Contractor's Annual Employment Report**  
Report Period: April 1, 2017 to March 31, 2018

Contracting State Agency Name: SUNY System Administration  
 Contract Number: CM-03213 Agency Business Unit: SNY01  
 Contract Term: 01/01/2017 to 06/30/2018 Agency Department ID: 3320241  
 Contractor Name: Heslin Rothenberg Farley & Mesiti P.C.  
 Contractor Address: 5 Columbia Circle, Albany, NY 12203  
 Description of Services Being Provided: Advising on trademark registration, licensing and related matters

**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 |
|---------------------------------------|---------------------|------------------------|-----------------------------------|
| 23-1011.00 lawyers                    | 1.00                | 13.20                  | \$5,920.00                        |
| disbursements paid on client's behalf | 0.00                | 0.00                   | \$1,180.95                        |
|                                       | 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                            |
| <b>Total this Page</b>                | 1.00                | 13.20                  | <b>\$7,100.95</b>                 |
| <b>Grand Total</b>                    | 1.00                | 13                     | <b>\$7,100.95</b>                 |

Name of person who prepared this report: Linda M. Seibert  
 Title: Business Manager  
 Preparer's Signature:   
 Date Prepared: 05/15/2018  
 Phone #: 518-452-5600