

SUNY Construction Fund

6170200

FORM B

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

Contracting State Agency Name: State University Construction
 Fund

Contract Number: T005469 Agency Business Unit: SCF01
 Contract Term: to Agency Department ID: 6170200
 Contractor Name: CannonDesign
 Contractor Address: 50 Fountain Plaza, Suite 200
 Buffalo, NY 14202
 Description of Services Being Provided: Professional Design 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

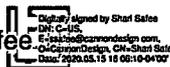
| Employment Category | Number of Employees | Number of Hours Worked | Amount Payable Under the Contract |
|---------------------|---------------------|------------------------|-----------------------------------|
| 27-3042.00 | 1 | 36.3 | \$2,631.75 |
| 17-1011.00 | 3 | 730.50 | \$103,026.24 |
| 17-2071.00 | 6 | 124 | \$20,592.67 |
| 17-2141.00 | 1 | 46 | \$7,462.63 |
| 17-2199.00 | 3 | 180 | \$26,281.60 |
| 17-3012.00 | 2 | 38 | \$1,903.85 |
| 17-3012.02 | 1 | 19 | \$1,597.90 |
| 17-3013.00 | 1 | 67.5 | \$4,637.10 |
| 17-3019.00 | 1 | 9.5 | \$999.78 |
| 27-1024.00 | 4 | 172.50 | \$16,242.70 |
| Total this page | 23 | 1423.30 | \$185,376.21 |
| Grand Total | 29 | 1579.6 | \$196,637.84 |

Name of person who prepared this report: Shari Safee

Title: Project Biller

Phone #: (716) 774-3400

Preparer's Signature: _____

Shari Safee 

Date Prepared: 5/15/2020

FORM B

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

Contracting State Agency Name: State University Construction
 Fund

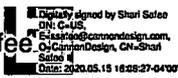
Contract Number: T005469 Agency Business Unit: SCF01
 Contract Term: to Agency Department ID: 6170200
 Contractor Name: CannonDesign
 Contractor Address: 50 Fountain Plaza, Suite 200
 Buffalo, NY 14202
 Description of Services Being Provided: Professional Design Services

- 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

| | Number of Employees | Number of Hours Worked | Amount Payable Under the Contract |
|------------------------|---------------------|------------------------|-----------------------------------|
| 43-9199.00 | 6 | 156.30 | \$11,261.63 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total this page | 6 | 156.30 | \$11,261.63 |
| Grand Total | 29 | 1579.6 | \$196,637.84 |

Name of person who prepared this report: **Shari Safee** Phone #: **(716) 774-3400**

Title: **Project Biller**

Preparer's Signature: Shari Safee 

Date Prepared: **5/15/2020**

FORM B

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

Contracting State Agency Name: State University Construction
Fund:

Contract Number: T005469 Agency Business Unit: SCF01
Contract Term: to Agency Department ID: 6170200
Contractor Name: CannonDesign
Contractor Address: 50 Fountain Plaza, Suite 200
Buffalo, NY 14202

Description of Services Being Provided: Professional Design 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 |
|---------------------|---------------------|------------------------|-----------------------------------|
| 27-3042.00 | 1 | 36.3 | \$2,631.75 |
| 17-1011.00 | 3 | 730.50 | \$103,026.24 |
| 17-2071.00 | 6 | 124 | \$20,592.67 |
| 17-2141.00 | 1 | 46 | \$7,462.63 |
| 17-2199.00 | 3 | 180 | \$26,281.60 |
| 17-3012.00 | 2 | 38 | \$1,903.85 |
| 17-3012.02 | 1 | 19 | \$1,597.90 |
| 17-3013.00 | 1 | 67.5 | \$4,637.10 |
| 17-3019.00 | 1 | 9.5 | \$999.78 |
| 27-1024.00 | 4 | 172.50 | \$16,242.70 |
| Total this page | 23 | 1423.30 | \$185,376.21 |
| Grand Total | 29 | 1579.6 | \$196,637.84 |

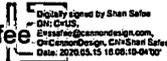
Name of person who prepared this report: Shari Safee

Title: Project Biller

Phone #: (716) 774-3400

Preparer's Signature: _____

Shari Safee



Date Prepared: 5/15/2020

FORM B

**New York State Consultant Services
Contractor's Annual Employment Report**
Report Period: April 1, 2018 to March 31, 2019

Contracting State Agency Name: State University Construction
Fund

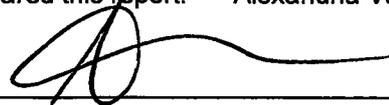
Contract Number: T005469 Agency Business Unit: SCF01
Contract Term: to Agency Department ID: 6170200

Contractor Name: CannonDesign
Contractor Address: 2170 Whitehaven Road
Grand Island, NY 14072

Description of Services Being Provided: Professional Design 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 |
|------------------------|---------------------|------------------------|-----------------------------------|
| 13-1051.00 | 1 | 4.0 | \$502.62 |
| 17-1011.00 | 4 | 896.0 | \$136,817.09 |
| 17-2071.00 | 5 | 112.5 | \$17,637.43 |
| 17-2141.00 | 3 | 208.5 | \$21,014.85 |
| 17-2199.00 | 4 | 490.0 | \$63,265.74 |
| 17-3012.00 | 1 | 13 | \$640.90 |
| 17-3027.00 | 1 | 113.5 | \$7,537.54 |
| 27-1024.00 | 4 | 288.5 | \$26,536.21 |
| 43-9199.00 | 1 | 185.6 | \$16,672.25 |
| 13-1199.05 | 1 | 157 | \$19,624.00 |
| Total this page | 25 | 2468.6 | \$310,248.63 |
| Grand Total | 44 | 2944.1 | \$341,278.61 |

Name of person who prepared this report: Alexandria Van Dick
Title: Project Biller Phone #: (716) 774-3521
Preparer's Signature: 
Date Prepared: 5/15/19

FORM B

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

| Contracting State Agency Name: | | | |
|---|---------------------|-------------------------------|-----------------------------------|
| Contract Number: T005749 | | Agency Business Unit: SCF01 | |
| Contract Term: to | | Agency Department ID: 6170200 | |
| Contractor Name: CannonDesign | | | |
| Contractor Address: 50 Fountain Plaza, Suite 200 Buffalo, NY 14202 | | | |
| Description of Services Being Provided: Professional Design Services | | | |
| Scope of Contract (Choose one that best fits): | | | |
| <input type="checkbox"/> Analysis <input type="checkbox"/> Evaluation <input type="checkbox"/> Research <input type="checkbox"/> Training | | | |
| <input type="checkbox"/> Data Processing <input type="checkbox"/> Computer Programming <input type="checkbox"/> Other IT consulting | | | |
| <input type="checkbox"/> Engineering <input checked="" type="checkbox"/> Architect Services <input type="checkbox"/> Surveying <input type="checkbox"/> Environmental Services | | | |
| <input type="checkbox"/> Health Services <input type="checkbox"/> Mental Health Services | | | |
| <input type="checkbox"/> Accounting <input type="checkbox"/> Auditing <input type="checkbox"/> Paralegal <input type="checkbox"/> Legal <input type="checkbox"/> Other Consulting | | | |
| | | | |
| Employment Category | Number of Employees | Number of Hours Worked | Amount Payable Under the Contract |
| 13-1051.00 | 2 | 11.5 | \$1,356.87 |
| 17-1011.00 | 3 | 476.5 | \$56,850.73 |
| 17-2071.00 | 3 | 25 | \$4,127.11 |
| 17-2141.00 | 1 | 104 | \$17,003.72 |
| 17-3013.00 | 2 | 43.5 | \$2,979.92 |
| 43-9199.00 | 6 | 142 | \$12,764.50 |
| | | | |
| | | | |
| | | | |
| | | | |
| Total this page | 17 | 802.5 | \$95,082.85 |
| Grand Total | 17 | 802.5 | \$95,082.85 |

Name of person who prepared this report: **Shari Safee**

Title: **Project Biller.**

Phone #: **(716) 774-3400**

Preparer's Signature: _____

Shari Safee
Digitally signed by Shari Safee
DN: cn=Shari Safee, o=CannonDesign, cn=Shari Safee
Date: 2020.05.15 10:19:25-0400

Date Prepared: **5/15/2020**

FORM B

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

| | |
|---|-------------------------------|
| Contracting State Agency Name: | |
| Contract Number: T006002 | Agency Business Unit: SCF01 |
| Contract Term: to | Agency Department ID: 6170200 |
| Contractor Name: CannonDesign | |
| Contractor Address: 50 Fountain Plaza, Suite 200 Buffalo, NY 14202 | |
| Description of Services Being Provided: Professional Design 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 |
|------------------------|---------------------|------------------------|-----------------------------------|
| 13-1051.00 | 3 | 33 | \$2,860.62 |
| 17-1011.00 | 5 | 347 | \$41,183.56 |
| 17-2071.00 | 6 | 89 | \$10,560.81 |
| 17-2141.00 | 2 | 70.5 | \$9,415.66 |
| 17-2199.00 | 1 | 16 | \$3,190.00 |
| 17-3011.00 | 1 | 4 | \$220.40 |
| 17-3012.00 | 3 | 62.7 | \$4,584.07 |
| 17-3013.00 | 2 | 82 | \$6,043.60 |
| 17-3019.00 | 1 | 24.5 | 2,533.15 |
| 27-1025.00 | 1 | 21 | \$1,360.44 |
| Total this page | 25 | 749.7 | \$81,952.31 |
| Grand Total | 33 | 855.4 | \$89,445.39 |

Name of person who prepared this report: **Shari Safee**

Title: **Project Biller**

Phone #: **(716) 774-3400**

Preparer's Signature: _____

Shari Safee

Digitally signed by Shari Safee
DN: c=US,
E=ssafee@cannondesign.com,
O=CannonDesign, CN=Shari Safee
Date: 2020.05.15 16:22:59-0400

Date Prepared: 5/15/2020

FORM B

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

Contracting State Agency Name:

Contract Number: T006002 Agency Business Unit: SCF01
 Contract Term: to Agency Department ID: 6170200
 Contractor Name: CannonDesign
 Contractor Address: 50 Fountain Plaza, Suite 200
 Buffalo, NY 14202
 Description of Services Being Provided: Professional Design 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

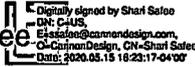
| Employment Category | Number of Employees | Number of Hours Worked | Amount Payable Under the Contract |
|------------------------|---------------------|------------------------|-----------------------------------|
| 43-9199.00 | 8 | 105.7 | \$7,493.08 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total this page | 8 | 105.7 | \$7,493.08 |
| Grand Total | 33 | 855.4 | \$89,445.39 |

Name of person who prepared this report: **Shari Safee**

Title: Project Biller Phone #: (716) 774-3400

Preparer's Signature: Shari Safee

Date Prepared: 5/15/2020



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: State University Construction Fund Agency Code:
Contract Number: T006104 6170000
Contract Term: 10/03/2014 to 07/25/2023
Contractor Name: M/E Engineering, PC
Contractor Address: 300 Trolley Boulevard, Rochester, NY 14606
Description of Services Being Provided: Mechanical, Electrical and Plumbing Engineering

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 | 3 | 159.50 | \$47,371.13 |
| 17-2141.00 | 6 | 1,365.50 | \$319,465.16 |
| 17-3013.00 | 1 | 2.00 | \$178.40 |
| 17-3023.03 | 4 | 120.00 | \$20,741.60 |
| 17-3027.00 | 4 | 349.00 | \$58,299.60 |
| 17-1011.00 | 1 | 80.50 | \$9,598.54 |
| 17-3011.01 | 2 | 10.50 | \$930.34 |
| 17-1011.00 | 3 | 48.50 | \$1,814.60 |
| 17-3011.00 | 1 | 3.50 | \$70.67 |
| 11-9041.00 | 1 | 2.00 | \$103.36 |
| 17-2051.00 | 3 | 80.25 | \$2,370.38 |
| 19-4091.00 | 5 | 1,363.50 | \$91,571.25 |
| 19-2041.00 | 3 | 87.00 | \$600.00 |
| Total this page | 37 | 3,871.75 | \$553,114.93 |
| Grand Total | | | |

Name of person who prepared this report: Jessica M Cucinotta

Preparer's Signature: Jessica M Cucinotta

Title: Accounting Representative

Phone #: (585) 288-5590

Date Prepared: 05/14/2020

(Use additional pages if necessary)

Page 1 of 2

FORM B

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

| Contracting State Agency Name: | | | |
|---|---------------------|-------------------------------|-----------------------------------|
| Contract Number: T006208 | | Agency Business Unit: SCF01 | |
| Contract Term: to | | Agency Department ID: 6170200 | |
| Contractor Name: CannonDesign | | | |
| Contractor Address: 50 Fountain Plaza, Suite 200 Buffalo, NY 14202 | | | |
| Description of Services Being Provided: | | | |
| Scope of Contract (Choose one that best fits): | | | |
| <input type="checkbox"/> Analysis <input type="checkbox"/> Evaluation <input type="checkbox"/> Research <input type="checkbox"/> Training | | | |
| <input type="checkbox"/> Data Processing <input type="checkbox"/> Computer Programming <input type="checkbox"/> Other IT consulting | | | |
| <input type="checkbox"/> Engineering <input checked="" type="checkbox"/> Architect Services <input type="checkbox"/> Surveying <input type="checkbox"/> Environmental Services | | | |
| <input type="checkbox"/> Health Services <input type="checkbox"/> Mental Health Services | | | |
| <input type="checkbox"/> Accounting <input type="checkbox"/> Auditing <input type="checkbox"/> Paralegal <input type="checkbox"/> Legal <input type="checkbox"/> Other Consulting | | | |
| | | | |
| Employment Category | Number of Employees | Number of Hours Worked | Amount Payable Under the Contract |
| 13-1051.00 | 2 | 4.5 | \$516.20 |
| 17-1011.00 | 14 | 5343.2 | \$709,772.27 |
| 17-2071.00 | 5 | 527.5 | \$79,392.84 |
| 17-2141.00 | 2 | 314.5 | \$44,208.97 |
| 17-3011.00 | 5 | 130 | \$10,651.70 |
| 17-3012.00 | 2 | 83.4 | \$6,589.02 |
| 17-3013.00 | 2 | 37 | \$2,988.45 |
| 27-1024.00 | 4 | 126 | \$14,948.70 |
| 27-1025.00 | 5 | 240.5 | \$21,108.99 |
| 43-9199.00 | 7 | 338.2 | \$24,614.96 |
| Total this page | 48 | 7144.8 | \$914,792.10 |
| Grand Total | 48 | 7144.8 | \$914,792.10 |

Name of person who prepared this report: **Shari Safee**

Title: Project Biller

Preparer's Signature: _____

Date Prepared: 5/15/2020

Shari Safee
Digitally signed by Shari Safee
 DN: cn=US,
 email=E.saf@cnndesign.com,
 o=CannonDesign, cn=Shari Safee
 Date: 2020.05.15 16:28:10-0400

Phone #: 716-774-3400

OSC Use Only:
 Reporting Code:
 Category Code:
 Date Contract Approved:

FORM B

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

State Agency Name: **SUCF** Agency Code: **[REDACTED]**
 Contract No.: **T006208** **0170200**
 Contract Term:
 Contractor Name: **M.J. Engineering and Land Surveying, P.C.**
 Contractor Address: **1533 Crescent Road, Clifton Park, NY 12065**
 Description of Services Being Provided: **Engineering and Surveying Services**

Scope of Contract (Choose one that best fits):

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Analysis | <input type="checkbox"/> Evaluation | <input type="checkbox"/> Research | <input type="checkbox"/> Training |
| <input type="checkbox"/> Data Processing | <input type="checkbox"/> Computer Programming | <input type="checkbox"/> Other IT Consulting | |
| <input checked="" type="checkbox"/> Engineering | <input type="checkbox"/> Architect Services | <input type="checkbox"/> Surveying | <input type="checkbox"/> Environmental Services |
| <input type="checkbox"/> Health Services | <input type="checkbox"/> Mental Health Services | <input type="checkbox"/> Accounting | |
| <input type="checkbox"/> Auditing | <input type="checkbox"/> Paralegal | <input type="checkbox"/> Legal | <input type="checkbox"/> Other Consulting |

| Employment Category | Number of Employees | Number of hours worked | Amount Payable Under the Contract |
|------------------------|---------------------|------------------------|-----------------------------------|
| 17-2051 Civil Engineer | 6 | 291.0 | \$16,555 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total this page | 6 | 291.0 | \$16,555 |
| Grand Total | 6 | 291.0 | \$16,555 |

Name of person who prepared this report:

Michael D. Panichelli, P.E.

Preparer's Signature:



Title:

President

Date Prepared:

May 5, 2020

(Use additional pages, if necessary)

FORM B

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

Contracting State Agency Name:

Contract Number: T006208 Agency Business Unit: SCF01
 Contract Term: to Agency Department ID: 6170200
 Contractor Name: CannonDesign
 Contractor Address: 50 Fountain Plaza, Suite 200
 Buffalo, NY 14202
 Description of Services Being Provided:

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 |
|---------------------|---------------------|------------------------|-----------------------------------|
| 13-1051.00 | 2 | 4.5 | \$516.20 |
| 17-1011.00 | 14 | 5343.2 | \$709,772.27 |
| 17-2071.00 | 5 | 527.5 | \$79,392.84 |
| 17-2141.00 | 2 | 314.5 | \$44,208.97 |
| 17-3011.00 | 5 | 130 | \$10,651.70 |
| 17-3012.00 | 2 | 83.4 | \$6,589.02 |
| 17-3013.00 | 2 | 37 | \$2,988.45 |
| 27-1024.00 | 4 | 126 | \$14,948.70 |
| 27-1025.00 | 5 | 240.5 | \$21,108.99 |
| 43-9199.00 | 7 | 338.2 | \$24,614.96 |
| Total this page | 48 | 7144.8 | \$914,792.10 |
| Grand Total | 48 | 7144.8 | \$914,792.10 |

Name of person who prepared this report: **Shari Safee**

Title: Project Biller

Preparer's Signature: _____

Date Prepared: 5/15/2020

Shari Safee
Digitally signed by Shari Safee
 DN: c=US,
 e=ShariSafee@cannondesign.com,
 o=CannonDesign, CN=Shari Safee
 Date: 2020.05.15 18:28:10-0400

Phone #: 716-774-3400

F

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 SUCF Agency Code: Project No 16064.00
Contract Number: T006247 6170200
Contract Term: TBD
Contractor Name: Popli Design Group
Contractor Address: 555 Penbrooke Dr., Penfield, NY 14526
Description of Services Being Provided: SUNY Brockport Allen Hall

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 | 2 | 17.00 | \$985.83 |
| 17-3013 | 1 | .50 | \$11.54 |
| 17-2141 | 1 | 1.00 | \$29.57 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total this page | 4 | 18.50 | \$1,026.94 |
| Grand Total | 4 | 18.50 | \$1,026.94 |

Name of person who prepared this report: Susan Frelser
Preparer's Signature: Susan Frelser
Title: Accounting Assistant Phone #: 585-388-2060
Date Prepared: 4/12/2020

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: State University Construction Fund Agency Code:
Contract Number: T006266
Contract Term: 08/24/2016 to 08/24/2021
Contractor Name: M/E Engineering, PC
Contractor Address: 300 Trolley Boulevard, Rochester, NY 14606
Description of Services Being Provided: Mechanical, Electrical and Plumbing Engineering

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 | 2 | 355.00 | \$74,202.55 |
| 17-2141.00 | 3 | 866.50 | \$130,316.15 |
| 17-3023.03 | 1 | 75.50 | \$6,511.08 |
| 17-3027.00 | 2 | 264.00 | \$25,736.50 |
| 17-3029.01 | 5 | 264.75 | \$21,629.54 |
| 17-2081.00 | 6 | 117.50 | \$9,400.00 |
| 17-3025.00 | 4 | 250.75 | \$10,030.00 |
| 19-4091.00 | 2 | 450.00 | \$18,000.00 |
| 27-4021.00 | 1 | 384.00 | \$33,810.00 |
| 17-1011.00 | 4 | 475.00 | \$18,369.14 |
| 17-3011.00 | 2 | 49.50 | \$963.08 |
| 17-4011.00 | 2 | 242.00 | \$7,355.76 |
| 11-9041.00 | 2 | 56.50 | \$3,966.63 |
| Total this page | 36 | \$3,851.00 | \$360,290.43 |
| Grand Total | | | |

Name of person who prepared this report: Jessica M Cucinotta

Preparer's Signature: Jessica M Cucinotta

Title: Accounting Representative

Phone #: (585) 288-5590

Date Prepared: 05/14/2020

(Use additional pages if necessary)

Page 1 of 2

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: State University Construction Fund Agency Code:
Contract Number: T006306
Contract Term: 02/23/2017 to 02/23/2022 *6170200*
Contractor Name: M/E Engineering, PC
Contractor Address: 300 Trolley Boulevard, Rochester, NY 14606
Description of Services Being Provided: Mechanical, Electrical and Plumbing Engineering

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 | 1 | 259.00 | \$99,862.08 |
| 17-2141.00 | 3 | 128.00 | \$30,971.38 |
| 17-3023.03 | 1 | 8.00 | \$1,104.00 |
| 17-3027.00 | 2 | 102.00 | \$15,264.89 |
| 19-2041.00 | 1 | 65.25 | \$3,688.23 |
| 11-1021.00 | 1 | 0.50 | \$55.77 |
| 43-6014.00 | 1 | 0.50 | \$43.50 |
| 17-1011.00 | 3 | 332.50 | \$8,906.06 |
| 17-3011.00 | 1 | 2.00 | \$46.16 |
| 11-9041.00 | 1 | 41.50 | \$2,414.06 |
| 17-2051.00 | 5 | 56.50 | \$10,780.50 |
| 17-3012.02 | 1 | 0.50 | \$45.00 |
| 43-3021.00 | 1 | 1.25 | \$88.75 |
| Total this page | 22 | 997.50 | \$173,250.38 |
| Grand Total | | | |

Name of person who prepared this report: Jessica M Cucinotta
 Preparer's Signature: *Jessica M Cucinotta*
 Title: Accounting Representative Phone #: (585) 288-5590
 Date Prepared: 05/14/2020

(Use additional pages if necessary)

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: State University Construction Fund Agency Code:
Contract Number: T006306 6170700
Contract Term: 02/23/2017 to 02/23/2022
Contractor Name: M/E Engineering, PC
Contractor Address: 300 Trolley Boulevard, Rochester, NY 14606
Description of Services Being Provided: Mechanical, Electrical and Plumbing Engineering

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 |
|------------------------|---------------------|------------------------|-----------------------------------|
| 43-9199.00 | 1 | 13.50 | \$739.50 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total this page | 1 | 13.50 | \$739.50 |
| Grand Total | 23 | 1,011.00 | \$173,989.88 |

Name of person who prepared this report: Jessica M Cucinotta
 Preparer's Signature: Jessica M Cucinotta
 Title: Accounting Representative Phone #: (585) 288-5590
 Date Prepared: 05/14/2020

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: State University Construction Fund Agency Code:
Contract Number: T006315
Contract Term: 03/30/2017 to 03/30/2022
Contractor Name: M/E Engineering, PC
Contractor Address: 300 Trolley Boulevard, Rochester, NY 14606
Description of Services Being Provided: Mechanical, Electrical and Plumbing Engineering

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 | 2 | 166.00 | \$36,810.28 |
| 17-2141.00 | 2 | 152.00 | \$28,292.60 |
| 17-3023.03 | 1 | 115.00 | \$10,808.98 |
| 17-3027.00 | 2 | 203.00 | \$23,710.00 |
| 17-1011.00 | 2 | 133.50 | \$4,924.83 |
| 17-3011.00 | 1 | 3.00 | \$63.46 |
| 17-2051.00 | 1 | 4.75 | \$570.00 |
| 17-3012.02 | 2 | 3.00 | \$260.00 |
| 43-3021.00 | 1 | 2.00 | \$55.00 |
| 43-9199.00 | 1 | 0.25 | \$13.75 |
| 19-2041.00 | 2 | 25.75 | \$3,787.50 |
| | | | |
| | | | |
| Total this page | 17 | 808.25 | \$109,296.40 |
| Grand Total | 17 | 808.25 | \$109,296.40 |

Name of person who prepared this report: Jessica M Cucinotta

Preparer's Signature: Jessica M Cucinotta

Title: Accounting Representative

Phone #: (585) 288-5590

Date Prepared: 05/14/2020

(Use additional pages if necessary)

Page 1 of 1

OSC Use Only:

Reporting Code:

Category Code:

Date Contract Approved:

FORM B

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

| | | | |
|---|--|--------------|--------------------------------|
| State Agency Name: | SUCF | Agency Code: | 3000 <i>Q170200</i> |
| Contract No.: | T006370 | | |
| Contract Term: | | | |
| Contractor Name: | M.J. Engineering and Land Surveying, P.C. | | |
| Contractor Address: | 1533 Crescent Road, Clifton Park, NY 12065 | | |
| Description of Services Being Provided: Engineering Services | | | |

| | | | |
|---|--|---|---|
| Scope of Contract (Choose one that best fits): | | | |
| <input type="checkbox"/> Analysis | <input type="checkbox"/> Evaluation | <input type="checkbox"/> Research | <input type="checkbox"/> Training |
| <input type="checkbox"/> Data Processing | <input type="checkbox"/> Computer Programming | <input type="checkbox"/> Other IT Consulting | <input type="checkbox"/> Environmental Services |
| <input checked="" type="checkbox"/> Engineering | <input checked="" type="checkbox"/> Architect Services | <input checked="" type="checkbox"/> Surveying | <input type="checkbox"/> Accounting |
| <input type="checkbox"/> Health Services | <input type="checkbox"/> Mental Health Services | <input type="checkbox"/> Legal | <input type="checkbox"/> Other Consulting |
| <input type="checkbox"/> Auditing | <input type="checkbox"/> Paralegal | | |

| Employment Category | Number of Employees | Number of hours worked | Amount Payable Under the Contract |
|---------------------------------------|---------------------|------------------------|-----------------------------------|
| 17-1011 Architects | 2 | 191.0 | \$24,377 |
| 17-1012 Landscape Architect | 1 | 37.0 | \$5,494 |
| 17-1022 Surveyor | 5 | 158.0 | \$20,423 |
| 17-2051 Civil Engineer | 28 | 5,035.5 | \$761,087 |
| 17-3022 Civil Engineering Technician | 8 | 662.0 | \$68,193 |
| 17-3031 Survey Technician | 9 | 369.0 | \$37,350 |
| 47-4011 Construction & Bldg Inspector | 1 | 14.0 | \$2,339 |
| | | | |
| Total this page | 54 | 6466.5 | \$919,264 |
| Grand Total | 54 | 6,466.5 | \$919,264 |

Name of person who prepared this report:

Michael D. Panichelli

Preparer's Signature:



Title:

President

Date Prepared:

May 7, 2020

(Use additional pages, if necessary)

OSC Use Only:
 Reporting Code:
 Category Code:
 Date Contract Approved:

FORM B

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

State Agency Name: **SUCF** Agency Code: **[REDACTED] (617020)**
 Contract No.: **T006370**
 Contract Term:
 Contractor Name: **Toscano Clements Taylor**
 Contractor Address: **16 Oakwood Road, Huntington, NY 11743**
 Description of Services Being Provided:

Scope of Contract (Choose one that best fits):

| | | | |
|--|---|--|--|
| <input type="checkbox"/> Analysis | <input type="checkbox"/> Evaluation | <input type="checkbox"/> Research | <input type="checkbox"/> Training |
| <input type="checkbox"/> Data Processing | <input type="checkbox"/> Computer Programming | <input type="checkbox"/> Other IT Consulting | <input type="checkbox"/> Environmental Services |
| <input type="checkbox"/> Engineering | <input type="checkbox"/> Architect Services | <input type="checkbox"/> Surveying | <input type="checkbox"/> Accounting |
| <input type="checkbox"/> Health Services | <input type="checkbox"/> Mental Health Services | <input type="checkbox"/> Legal | <input checked="" type="checkbox"/> Other Consulting |
| <input type="checkbox"/> Auditing | <input type="checkbox"/> Paralegal | | |

| Employment Category | Number of Employees | Number of hours worked | Amount Payable Under the Contract |
|---------------------|---------------------|------------------------|-----------------------------------|
| 13-1051.00 | 8 | 274.0 | \$69,500 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total this page | 8 | 274.0 | \$69,500 |
| Grand Total | 8 | 274.0 | \$69,500 |

Name of person who prepared this report:

Tema Leviter

Preparer's Signature:

Tema R. Leviter

Title:

Payroll Manager

Date Prepared:

May 12, 2020

(Use additional pages, if necessary)

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: State University Construction Fund Agency Code:
Contract Number: T006370 *0170200*
Contract Term: Not Available
Contractor Name: Atlantic Testing Laboratories, Limited
Contractor Address: 6431 US Highway 11, Canton, NY 13617
Description of Services Being Provided: Environmental Consulting and Construction Materials Engineering & Testing (Subconsultant to M.J. Engineering and Land Surveying, P.C.)

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 Paid Under the Contract |
|---|---------------------|------------------------|--------------------------------|
| 17.2051.00 Civil Engineering | 4 | 68.00 | \$6,120.00 |
| 17.3022.00 Civil Engineering Technician | 18 | 796.75 | \$39,837.50 |
| 17.2081.00 Environmental Engineer | 3 | 22.75 | \$2,047.50 |
| 17.3025.00 Environmental Technician | 2 | 11.25 | \$450.00 |
| 19.4091.00 Environmental Specialist | 1 | 10.25 | \$512.50 |
| 47.5021.00 Earth Driller | 1 | 14.50 | \$870.00 |
| 47.5081.00 Earth Driller Helper | 1 | 17.50 | \$1,400.00 |
| | | | |
| Total this page | 30 | 941.00 | \$51,237.50 |
| Grand Total | 30 | 941.00 | \$51,237.50 |

Name of person who prepared this report: Jennifer E. Bray

Preparer's Signature: 
Title: Contracts Compliance Manager Phone No: (315) 735-3309
Date Prepared: May 12, 2020

Chapter 10 defines Consulting Services to include any contracts entered into by the University for analysis, evaluation, research, training, data processing, computer programming, engineering, environmental, health, and mental health services, accounting, auditing, paralegal, legal or similar services.

(Note: Access the O*NET database, which is available through the US Department of Labor's Employment and Training Administration, on-line at online.onetcenter.org to find a list of occupations.)

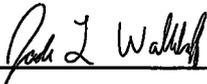
FORM B

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

Contracting State Agency Name: SUCF
 Contract Number: T006370 Agency Business Unit:
 Contract Term: / / to / / Agency Department ID: ~~00000~~
 Contractor Name: Jade Stone Engineering, PLLC C6170200
 Contractor Address: 444 Vanduzee Street Watertown, NY 13601
 Description of Services Being Provided: Electrical Engineering 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 |
|---------------------------------|---------------------|------------------------|-----------------------------------|
| 17-2071.00 Electrical Engineers | 3.00 | 50.00 | \$5,342.30 |
| 17-3012.02 Electrical Drafter | 1.00 | 1.50 | \$120.20 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total this Page | 4.00 | 51.50 | \$5,462.50 |
| Grand Total | 4.00 | 51 | \$5,462.50 |

Name of person who prepared this report: Jada L. Walldroff
 Title: Chief Financial Officer Phone #: 315.836.4062
 Preparer's Signature: 
 Date Prepared: 05/12/2020

OSC Use Only:
 Reporting Code:
 Category Code:
 Date Contract Approved:

FORM B

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

State Agency Name: **SUCF** Agency Code: **[REDACTED]**
 Contract No.: **T006370D**
 Contract Term: **2019** *6/7/2020*
 Contractor Name: **Two Twelve**
 Contractor Address: **236 W 27th Street, Suite 802, New York, NY 10001**
 Description of Services Being Provided: **Signage Design**

Scope of Contract (Choose one that best fits):

| | | | |
|--|--|------------------------------------|---|
| <input type="checkbox"/> Analysis | <input type="checkbox"/> Evaluation | <input type="checkbox"/> Research | <input type="checkbox"/> Training |
| <input type="checkbox"/> Data Processing | <input type="checkbox"/> Computer Programming | <input type="checkbox"/> Surveying | <input type="checkbox"/> Other IT Consulting |
| <input type="checkbox"/> Engineering | <input checked="" type="checkbox"/> Architect Services | <input type="checkbox"/> Legal | <input type="checkbox"/> Environmental Services |
| <input type="checkbox"/> Health Services | <input type="checkbox"/> Mental Health Services | | <input type="checkbox"/> Accounting |
| <input type="checkbox"/> Auditing | <input type="checkbox"/> Paralegal | | <input type="checkbox"/> Other Consulting |

| Employment Category | Number of Employees | Number of hours worked | Amount Payable Under the Contract |
|------------------------------|---------------------|------------------------|-----------------------------------|
| Graphic Designers 27-1024.00 | 3 | 30.8 | \$10,750 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total this page | 3 | 30.8 | \$10,750 |
| Grand Total | 3 | 30.8 | \$10,750 |

Name of person who prepared this report:

Lyndsay Carroll

Preparer's Signature:

L. Carroll

Title:

Client Services Manager

Date Prepared:

May 4, 2020

(Use additional pages, if necessary)

FORM B

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

| | |
|---|-------------------------------|
| Contracting State Agency Name: | |
| Contract Number: T006435 | Agency Business Unit: SCF01 |
| Contract Term: to | Agency Department ID: 6170200 |
| Contractor Name: CannonDesign | |
| Contractor Address: 50 Fountain plaza, Suite 200 Buffalo, NY 14202 | |
| Description of Services Being Provided: Professional Design Services | |
| Scope of Contract (Choose one that best fits): | |
| <input type="checkbox"/> Analysis <input type="checkbox"/> Evaluation <input type="checkbox"/> Research <input type="checkbox"/> Training | |
| <input type="checkbox"/> Data Processing <input type="checkbox"/> Computer Programming <input type="checkbox"/> Other IT consulting | |
| <input type="checkbox"/> Engineering <input checked="" type="checkbox"/> Architect Services <input type="checkbox"/> Surveying <input type="checkbox"/> Environmental Services | |
| <input type="checkbox"/> Health Services <input type="checkbox"/> Mental Health Services | |
| <input type="checkbox"/> Accounting <input type="checkbox"/> Auditing <input type="checkbox"/> Paralegal <input type="checkbox"/> Legal <input type="checkbox"/> Other Consulting | |

| Employment Category | Number of Employees | Number of Hours Worked | Amount Payable Under the Contract |
|------------------------|---------------------|------------------------|-----------------------------------|
| 13-1051.00 | 3 | 9.5 | \$1,214.43 |
| 17-1011.00 | 18 | 2875 | \$418,744.35 |
| 17-2071.00 | 5 | 160 | \$29,021.66 |
| 17-2141.00 | 3 | 275 | \$33,821.22 |
| 17-2199.00 | 1 | 108 | \$13,055.02 |
| 17-3011.00 | 8 | 188.5 | \$12,400.69 |
| 17-3012.00 | 2 | 42.5 | \$3,306.73 |
| 17-3013.00 | 1 | 1.5 | \$100.05 |
| 27-1025.00 | 1 | 49.5 | \$3,206.75 |
| | | | |
| Total this page | | | |
| Grand Total | 42 | 3709.5 | \$514,870.90 |

Name of person who prepared this report: **Shari Safee**

Title: Project Biller

Shari Safee

Phone #: (716) 774-3400

Preparer's Signature: _____

Digitally signed by Shari Safee
DN: cn=US,
E=ShariSafee@cannondesign.com,
O=CannonDesign, CN=Shari Safee
Date: 2020.05.15 16:28:44-04'00'

Date Prepared: 5/15/2020

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: State University Construction Fund Agency Code:
Contract Number: T006518
Contract Term: 09/06/2019 to 09/06/2024
Contractor Name: M/E Engineering, PC
Contractor Address: 300 Trolley Boulevard, Rochester, NY 14606
Description of Services Being Provided: Mechanical, Electrical and Plumbing Engineering

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 | 2 | 79.00 | \$17,383.24 |
| 17-2141.00 | 2 | 7.00 | \$1,143.64 |
| 17-3013.00 | 1 | 39.00 | \$2,347.45 |
| 17-3023.03 | 1 | 2.50 | \$204.65 |
| 17-3027.00 | 2 | 32.50 | \$2,997.53 |
| 17-1011.00 | 2 | 333.50 | \$32,212.03 |
| 17-3011.00 | 2 | 102.00 | \$6,334.60 |
| 17-1011.00 | 3 | 260.00 | \$72,000.00 |
| 17-2051.00 | 4 | 20.50 | \$5,764.40 |
| 17-3012.02 | 1 | 0.50 | \$52.20 |
| 43-9199.00 | 2 | 4.75 | \$483.40 |
| 19-2041.00 | 3 | 81.25 | \$6,426.25 |
| 11-1021.00 | 1 | 1.75 | \$183.75 |
| Total this page | 26 | 964.25 | \$147,533.14 |
| Grand Total | 26 | 964.25 | \$147,533.14 |

Name of person who prepared this report: Jessica M Cucinotta

Preparer's Signature: Jessica M Cucinotta

Title: Accounting Representative

Phone #: (585) 288-5590

Date Prepared: 05/14/2020

(Use additional pages if necessary)

Page 1 of 1

6

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 SUCF Agency Code: Project No 18066.00
Contract Number: T170135 *6170200*
Contract Term: TBD
Contractor Name: Popli Design Group
Contractor Address: 555 Penbrooke Dr., Penfield, NY 14526
Description of Services Being Provided: SUNY Buffalo State Bldg 50 Reno

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 | 6 | 405.00 | \$16,694.58 |
| 17-3023 | 1 | 4.00 | \$133.64 |
| 17-2141 | 4 | 351.50 | \$12,008.92 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Total this page | 11 | 760.50 | \$28,837.14 |
| Grand Total | 11 | 760.50 | \$28,837.14 |

Name of person who prepared this report: Susan Frelier
Preparer's Signature: *Susan Frelier*
Title: Accounting Assistant Phone #: 585-388-2060
Date Prepared: 4/12/2020

