APPENDIX O

FORM B			OSC Use Only: Reporting Code: Category Code:	
State Consultant Services Contractor's Annual Employment Report				
Keport rei	iod: April 1,	to March 31,		
Contracting State Agency Name: NYSIF Agency Code: 7010204 Contract Number: PR 105621 Contract Term:05/10/23 to 11/09/25 Contractor Name: Unique Comp Inc Contractor Address: Description of Services Being Provided:				
Scope of Contract (Choose one that best fits): Analysis				
Employment Category	Number of Employees	Number of Ho	ours Worked	Amount Payable Under the Contract
Computer Programmer Analysts	1			582,708.72
Total this page	1.00	0.00		
Grand Total				
Name of person who prepared this rep Preparer's Signature: Title: Sr. Resource Manager Date Prepared:		one #: 718-39	92-5100	-

Use additional pages if necessary)

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