

APPENDIX I
Consultant Disclosure
Form A

OSC Use Only:

Reporting Code:

Category Code:

Date Contract Approved:

FORM A

State Consultant Services - Contractor's Planned Employment
From Contract Start Date Through The End Of The Contract Term

| | |
|-------------------------------|-----------------------------|
| State Agency Name: CUCF | Agency Code: 043 |
| Contractor Name: NYSTEC | Contract Number: PN691AG |
| Contract Start Date: 06/01/24 | Contract End Date: 01/17/25 |

| Employment Category | Number of Employees | Number of hours to be worked | Amount Payable Under the Contract |
|--|---------------------|------------------------------|-----------------------------------|
| Engineer/Analyst III 15-1211.00 | 2 | 404 | \$ 58,887.04 |
| Engineer/Analyst III (Travel) 15-1211.00 | 1 | 170 | 34,129.20 |
| Engineer/Analyst VI 15-1211.00 | 1 | 480 | 102,604.80 |
| Sr. Engineer/Manager 15-1211.00 | 5 | 1102 | 247,509.20 |
| Sr. Engineer/Manager (Travel) 15-1211.00 | 2 | 50 | 13,980.00 |
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| Total this page | 11 | 2206 | \$ 457,110.24 |
| Grand Total | | | |

Name of person who prepared this report: Maribel Gonzalez

Title: Procurement Analyst

Phone #: 646-664-2727

Preparer's Signature: Maribel Gonzalez

Date Prepared: 5/28/24

(Use additional pages, if necessary)