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: City University of New York	Agency Code: CNY01
Contractor Name: Grand River Solutions, Inc.	Contract Number: C242526
Contract Start Date: Upon approval by OSC	Contract End Date:

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Lead Firm Representative	1	30	\$8,250
Designated Consultant	1	460	\$115,000
First Alternate Designated Consultant	1	40	\$10,000
Second Alternate Designated Consultant	1	20	\$5,000
Total this page	4	550	\$138,250
Grand Total		550	\$138,250

Name of person who pre	epared this report:	Caron Christian
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Title: Deputy Chief Procurement Officer	Phone #: 646-664-3062
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Preparer's Signature: <u>Caron Christian</u>			
Date Prepared: 1/13/2025			
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