

**FORM A**

**New York State Consultant Services  
Contractor's Planned Employment**  
From Contract Start Date Through the End of the Contract Term

State Agency Name: SUNY Upstate Medical

State Agency Department ID:

Agency Business Unit: 28110

Contractor Name: Dwyer Architectural

Contract Number: D550383

Contract Start Date: 08/07/2024

Contract End Date: / /

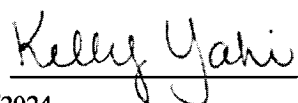
Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
17-1011.00 Architects, Except Landscape and Naval (Dwyer)	2.00	1,792.00	\$242,372.00
17-3011.01 Architectural Drafters (Dwyer)	2.00	1,402.00	\$148,447.00
46-694 - Project Coord (Dwyer)	1.00	381.00	\$32,804.00
	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
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	5.00	3,575.00	\$423,623.00
<b>Grand Total</b>			

Name of person who prepared this report: Kelly Yahi, AIA, IIDA, NCDIQ

Title: Partner

Phone #: 315-473-1800

Preparer's Signature:



Date Prepared: 08/21/2024

(Use additional pages, if necessary)

Page of

**FORM A**

**New York State Consultant Services  
Contractor's Planned Employment**  
From Contract Start Date Through the End of the Contract Term

State Agency Name: SUNY Upstate Medical

State Agency Department ID:

Agency Business Unit: 28110

Contractor Name: Ravi Engineering

Contract Number: D550383

Contract Start Date:

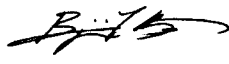
Contract End Date: / /

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
17-2051.00 - Civil Engineering	2.00	77.00	\$11,461.06
19-2041.00 Environmental Scientist and Specialist	2.00	51.00	\$4,912.61
17-3025.00-Environmental Engineering Technician	1.00	44.00	\$4,596.33
	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
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
<b>Total this Page</b>	<b>5.00</b>	<b>172.00</b>	<b>\$20,970.00</b>
<b>Grand Total</b>			

Name of person who prepared this report: Benjamin L. Reddy

Title: Environmental Department Manager

Phone #: 585-697-2083

Preparer's Signature: 

Date Prepared: 08/15/2024

(Use additional pages, if necessary)

Page of

## FORM A

**New York State Consultant Services  
Contractor's Planned Employment**  
From Contract Start Date Through the End of the Contract Term

State Agency Name: SUNY Upstate Medical

State Agency Department ID:

Agency Business Unit: 28110

Contractor Name: John P Stopen Engineering, LLP

Contract Number: D550383

Contract Start Date: / /

Contract End Date: / /

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
17-2051.00 Civil Engineer - Principal	1.00	120.00	\$20,736.00
17-3022.00 Civil Engineer Technician	2.00	354.00	\$44,815.68
	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
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	3.00	474.00	\$65,551.68
Grand Total			

Name of person who prepared this report: Matthew W. McKee

Title: Partner

Phone #: 315-472-5238

Preparer's Signature: 

Date Prepared: 8/13/2024

**FORM A**

**New York State Consultant Services  
Contractor's Planned Employment**  
From Contract Start Date Through the End of the Contract Term

State Agency Name: SUNY Upstate Medical

State Agency Department ID:

Agency Business Unit:

Contractor Name: Trophy Point, LLC

Contract Number: D550383

Contract Start Date: 08/19/2024

Contract End Date: / /

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Cost Estimating 13-1051.00	4.00	124.00	\$17,955.50
	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
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	4.00	124.00	\$17,955.50
<b>Grand Total</b>			

Name of person who prepared this report: Richard Chudzik

Title: President

Phone #: 716-823-0006

Preparer's Signature: Richard Chudzik

Date Prepared: 08/27/2024

## FORM A

**New York State Consultant Services  
Contractor's Planned Employment**  
From Contract Start Date Through the End of the Contract Term

State Agency Name: SUNY Upstate Medical

State Agency Department ID:

Agency Business Unit: 28110

Contractor Name: IBC Engineering PC

Contract Number: D550383

Contract Start Date: / /

Contract End Date: / /

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Mechanical Engineer	3.00	782.00	\$114,900.00
Electrical Engineer	1.00	470.00	\$74,497.00
General Operations Manager	1.00	180.00	\$33,400.00
Chief Executive	1.00	80.00	\$17,346.00
Mechanical Drafter	2.00	360.00	\$34,150.00
Electrical Drafter	1.00	190.00	\$18,174.00
	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
Total this Page	9.00	2,062.00	\$292,467.00
Grand Total			

Name of person who prepared this report: Andrew J Jarosz

Title: Associate

Phone #: 585-233-6834

Preparer's Signature: 

Date Prepared: 8/12/2024

**FORM A**

**New York State Consultant Services  
Contractor's Planned Employment**  
From Contract Start Date Through the End of the Contract Term

State Agency Name: SUNY Upstate Medical

State Agency Department ID:

Agency Business Unit: 28110

Contractor Name: PDC Facilities, Inc

Contract Number: D550383

Contract Start Date: 0/0/0

Contract End Date: / /

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
17-3011.01 Architectural & Civil Drafters	1.00	22.00	\$2,750.00
13-1082.00 Project Management Specialists	2.00	27.00	\$5,799.75
	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	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	3.00	0.00	\$8,549.75
Grand Total			

Name of person who prepared this report: Matt Boesel

Title: RF Division Manager

Phone #: 414-852-0584

Preparer's Signature: 

Date Prepared: 11/14/2024

(Use additional pages, if necessary)

Page of

**FORM A**

**New York State Consultant Services  
Contractor's Planned Employment**  
From Contract Start Date Through the End of the Contract Term

State Agency Name: SUNY Upstate Medical

State Agency Department ID:

Agency Business Unit: 28110

Contractor Name: PDC Facilities, Inc

Contract Number: D550383

Contract Start Date: 0/0/0

Contract End Date: / /

<b>Employment Category</b>	<b>Number of Employees</b>	<b>Number of Hours to be Worked</b>	<b>Amount Payable Under the Contract</b>
17-3011.01 Architectural & Civil Drafters	1.00	22.00	\$2,750.00
13-1082.00 Project Management Specialists	2.00	27.00	\$5,750.00
	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	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	3.00	0.00	\$8,500.00
<b>Grand Total</b>			

Name of person who prepared this report: Matt Boesel

Title: RF Division Manager

Phone #: 414-852-0584

Preparer's Signature: 

Date Prepared: 11/14/2024