

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: HOLT Architects, PC

Contract Number: D550394

Contract Start Date: 11/06/2024


Contract End Date: 5/1/2026

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
11-1011.00	1.00	32.00	\$8,498.00
17-3011.00	2.00	746.00	\$79,505.00
13-1051.00	1.00	40.00	\$4,517.00
17-2141.00-Mech	2.00	193.50	\$33,600.00
17-2071.00-Elec	1.00	133.00	\$22,750.00
17-211.02	1.00	32.00	\$5,515.00
17-2081.00	2.00	99.00	\$20,115.00
13-1051.00	1.00	68.00	\$10,217.00
Reimbursable Expenses	0.00	0.00	\$3,976.00
	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	11.00	1,343.50	\$188,693.00
Grand Total	11.00	1,343.50	\$188,693.00

Name of person who prepared this report: Allison L Short

Title: Business Manager

Phone #: 607-273-7600

Preparer's Signature: 

Date Prepared: 11/22/2024