

CONTRACTOR DISCLOSURE FORM A

AC 271-S (Effective 4/12)

**New York State Consultant Services
Contractor's Planned Employment**

From Contract Start Date Through the End of the Contract Term

State Agency Name: NYS Workers' Compensation Board

State Agency Department ID: 3560000

Agency Business Unit: WCB01

Contractor Name: 22nd Century

Contract Number: C140415

Contract Start Date: 5 /15/ 2024

Contract End Date: 5 /14/ 2027

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
15-1253.00	5	3000	\$301,750
15-1252.00	31	16,000	\$1,240,825
15-1255.00	1	600	\$67,025
15-1244.00	1	600	\$69,769
15-2051.01	1	600	\$67,900
15-1243.01	2	1,200	\$92,725
15-1299.08	4	2,400	\$295,750
Total this page	45	24,400	\$2,135,744
Grand Total	45	24,400	\$2,135,744

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Date Prepared: 4 /19/24

Use additional pages if necessary

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