Staten Island Developmental Disabilities Service Office 3660239

FORM B

New York	State Co	onsultant	Servi	ces
Contractor's	Annual	Employr	nent	Report

Report Period: April 1, 24 to March 31, 25

Contracting State Agency Name: NYS OPWDD STATEN ISLAND						
Contract Number: TOSSI00788		Agency Business Unit:				
Contract Term: 08/01/2024 to 07/31/2025 Agency Department ID:						
Contractor Name: Elite Pharmacy Consulting Services						
Contractor Address: 1225 Franklin Avenue suite 325., Garden City, NY 11530						
Description of Services Being Provided: Medication Reviews						
Scope of Contract (Choose one that best fits):						
Analysis Evaluation Research Training						
Data Processing Computer Programming Other IT consulting						
Engineering Architect Services Surveying Environmental Services						
Health Services Mental Health Services						
Accounting Auditing Pa						
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
O Independent consultant Chame	of med servior00	0.00	\$0.00			
0	0.00	0.00	\$0.00			
0	0.00	0.00	\$0.00			
0	0.00	0.00	\$0.00			
0	0.00	0.00	\$0.00			
0	0.00	0.00	\$0.00			
0	0.00	0.00	\$0.00			
0	0.00	0.00	\$0.00			
0	0.00	0.00	\$0.00			
0	0.00	0.00	\$0.00			
0	0.00	0.00	\$0.00			
0	0.00	0.00	\$0.00			
0	0.00	0.00	\$0.00			
Total this Page	0.00	0.00	\$ 0.00			
Grand Total			\$7,080.00			

Name of person who prepared this report: Rita Amigdalos

Title: President/CEO

Preparer's Signature:

Phone #: 516-512-8958

Date Prepared: 05/07/2025

(Use additional pages, if necessary)