# Office of Addiction Services and Supports 3670000

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

, ,	OASAS		
Contract Number: C004376		Agency Business Ur	
Contract Term: 09/01/2019 to 08/	31/2024	Agency Department	ID: 3670000
Contractor Name: Dulcian Inc.			
Contractor Address: 701 Amboy Ave	., Woodbridge, N	J 07095	
Description of Services Being Provid	ed: SABRS Syst	em Support	
Scope of Contract (Choose one that b	nest fite):		
	search 🔲 Trai	nina	
☐ Data Processing ☐ Computer Pro		Other IT consulting	
☐ Engineering ☐ Architect Services	• • –	•	Services
☐ Health Services ☐ Mental Health		_	
Accounting Auditing Pa	ıralegal 🔲 Leg	al Dther Consult	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
15-1133 Software Developers	2.00	108.00	\$15,120.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	
- II	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 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

2.00

Name of person who prepared this report: Caryl Lee Fisher

Title: Corporation Secretary

Phone #: 212-595-7223

108

Preparer's Signature: Date Prepared: 4//11/2025

**Grand Total** 

\$15,120.00

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: **OASAS** 

Contract Number: C004395 Agency Business Unit: OAS01 Contract Term: 06/01/2021 to 09/30/2025 Agency Department ID: 3670000

Contractor Name: Research Foundation for Mental Hygiene (RFMH) Contractor Address: 150 Broadway, Suite 301, Menands, NY 12204

Description of Services Being Provided: Fiscal Administration

Scope of Contract (Choose one that b	est fits):		
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Tra	ining	
☐ Data Processing ☐ Computer Pro	ogramming	Other IT consulting	
☐ Engineering ☐ Architect Services	Surveying	g Environmental	Services
☐ Health Services ☐ Mental Health	Services		
	ralegal 🔲 Leg	gal 🔲 Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
13.1111.00	6.50	12,675	\$1,596,067.11
	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	6.50	12,675	\$ 1,596,067.11
Grand Total	6.50	12,675	\$ 1,596,067.11

Name of person who prepared this report: Blesilda Nuqui	
Title: Assistant Director of Grants and Contracts	Phone #: 518-474-5661

Blesilda Nugui

Date Prepared: 5/09/2025

Preparer's Signature:

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: C004421 Agency Business Unit: OAS01
Contract Term: 08/01/2022 to 07/31/2027 Agency Department ID: 3670000

Contractor Name: Research Foundation for Mental Hygiene (RFMH) Contractor Address:150 Broadway, Suite 301, Menands, NY 12204

Description of Services Being Provided: Fiscal Administration

☐ Data Processing ☐ Computer Pro☐ Engineering ☐ Architect Services ☐ Health Services ☐ Mental Health	search	_	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
13.1111.00	29.80	58,110	\$3,617,035.71
	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	29.80	58,110	\$3,617,035.71
Grand Total	29.80	58,110	\$3,617,035.71

Name of person who prepared this report: Blesilda Nuqui

Title: Assistant Director of Grants and Conracts

Phone #: 518-474-5661

Preparer's Signature: Blasilda Nugui

Date Prepared: 5/9 / 2025

### **New York State Consultant Services** Contractor's Annual Employment Report

Report Period: April 1, 2024	to March 31, 2025
	NY 10701
Scope of Contract (Choose one that best fits):  Analysis Evaluation Research Train  Data Processing Computer Programming Engineering Architect Services Surveying  Health Services	Other IT consulting

☐ Accounting ☐ Auditing ☐	☐ Paralegal ☐ Lega	Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
11-3031.01	6.00	622.75	\$33,913.31
	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	6.00	622.75	\$33,913.31
Grand Total	6.00	622	\$33,913.31

N	lame of	person	who	prepared	this i	report:	Alicia	Coleman
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Title: AVP Finance

Phone #: 914-965-3700

Preparer's Signature:

Date Prepared: 414125

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contract Number: C004428

Agency Business Unit: OAS01

Contract Number, Coos-120

Contract Term: 11/01/2022 to 10/31/2027

Agency Department ID: 3670000

Contractor Name: University of Rochester/Department of Psychiatry

Contractor Address: 2613 West Henrietta Road, Suite C, Rochester, NY 14623

Description of Services Being Provided: Consultant/Psychiatric Services

Scope of Contract (Choose one that b	est fits):		
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Trai	ining	
☐ Data Processing ☐ Computer Pro	ogramming 🔲	Other IT consulting	
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services
☐ Health Services ☐ Mental Health	Services		
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	al 🗌 Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1223.00 Psychiatrists	2.00	347.50	\$69,152.50
29-1223.00 Psychiatrists (Monthly 24x7 On-Call Stipend at \$250/month)	0.00	0.00	\$3,000.00
	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	2.00	347.50	\$72,152.50
Grand Total	2.00	347.50	\$72,152.50

Name of person who prepared this report: Laurie Weit

Title: Accountant II

Phone #: (585)275-9155

Preparer's Signature:

Laurie A Weit Date: 2025.05.09 09:42:55 -04:00

Date Prepared: 5/9/2025

(Use additional pages, if necessary)

### New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency	Name:	OASAS
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Contract Number: C004430 Agency Business Unit: OAS01
Contract Term: 11/01/2023 to 10/31/2028 Agency Department ID: 3670000

Contractor Name: Netsmart Technologies, inc.

Contractor Address: 11100 Nall Avenue, Overland Park, KS 66211

Description of Services Being Provided: Consultant/Technology Maintenance Services

Scope of Contract (Choose one that b	est fits):		
☐ Analysis ☐ Evaluation ☐ Re	search 🛛 🗀 Trai	ining	
☐ Data Processing ☐ Computer Processing	ogramming 🛛	Other IT consulting	
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services
☐ Health Services ☐ Mental Health	Services		
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	jal 🔲 Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Software Subscription, Management Services, Hosting/Cloud Services	47.00	5,410.00	\$935,926.55
Implementation & Upgrade Professional Services	7.00	956.00	\$175,018.00
	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	54.00	6,366.00	\$1,110,944.55
Grand Total	54.00	6,366.00	\$1,110,944.55

|--|

Title: Executive Vice President Phone #: 800-842-1973

Preparer's Signature: \_\_

Date Prepared: 5/7/2025

### **New York State Consultant Services Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

	OASAS					
Contract Number: C004431 Agency Business Unit: OAS01						
Contract Term: 1/01/2024 to 12/31/2027 Agency Department ID: 3670000						
Contractor Name: NY Council on Problem Gambling, Inc.						
Contractor Address: 100 Great Oaks Blvd., Suite 104, Albany, NY 12203						
Description of Services Being Provided: Statewide problem gambling services						
Scope of Contract (Choose one that b	oot fito).					
<b>4</b>		ning				
Data Processing Computer Processing		Other IT consulting				
☐ Engineering ☐ Architect Services	-		Services			
☐ Health Services ☐ Mental Health	_ , ,		CO. 11003			
	ralegal 🔲 Leg	al 🛛 Other Consul	tina			
	Number of	Number of	<del></del>			
Employment Category	Employees	Hours Worked	Amount Payable Under the Contract			
11-1011.00 Chief Executive	3.00	1355.4	\$78021.80			
43-6011.00 Executive Administrative Assistant	1.00	451.80	\$16,214.38			
11-9199.00 Manager, All Other	10.00	13,696.80	\$539,583.52			
	9.00					
	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	14.00	15,504.00	\$633,819.70			
Grand Total	14.00	15,504	\$633,819.70			

Title: Executive Director Preparer's Signature:

Date Prepared: 05/08/2025

James J. Many

Phone #: 518.867.4084

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: C004435 Agency Business Unit: OAS01 Contract Term: 06/01/2023 to 09/30/2025 Agency Department ID: 3670000

Contractor Name: Partnership to End Addiciton

Contractor Address: 711 3rd Avenue, Suite 500, New York, NY 10017

Description of Services Being Provided: Building a mobile application to reduce or delay the negative health consequences of substance us/misuese by providing tools and resources that

empower youth, their care givers, individuals, and families.

Analysis							
☐ Health Services ☐ Mental Health Services							
☐ Accounting ☐ Auditing ☐ Paralegal ☐ Legal ☐ Other Consulting							
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract							
CLINICAL RESEARCH COORDINATOR 11-9121.01	3.00	47.33	\$2,851.35				
COMPUTER & INFORMATION RESEARCH SCIENTISTS 15-1221.00	3.00	3,240.30	\$119,662.99				
MANAGERS, ALL OTHER 11-9199.00	1.00	20.00	\$1,371.43				
	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
Fringe @ 34%	0.00	0.00	\$42,121.16				
	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	7.00	3,307.63	\$166,006.93				
Grand Total	7.00	3,307	\$166,006.93				

Ν	lame	of	person	who	prepared	this	report:	Joshua	W	ein	berg
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Title: VP, Finance & Controller Joshua Weinberg Phone #: 21-973-3527

Preparer's Signature:

Date Prepared: 05/13/2025

### New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting	State	Δαρηςν	Name.	OASAS
しいコロコしほれ	State	AUCITO	maille.	UAGAG

Contract Number: C004436 Agency Business Unit: OAS01
Contract Term: 07/01/2023 to 06/30/2028 Agency Department ID: 3670000

Contractor Name: Third Horizon Strategies LLC

Contractor Address: 515 N State St., Suite 300, Chicago, IL 60654

Description of Services Being Provided: Restructure Addiction Services Financing

Scope of Contract (Choose one that best fits):							
☐ Data Processing ☐ Computer Pro	☐ Data Processing ☐ Computer Programming ☐ Other IT consulting						
☐ Engineering ☐ Architect Services	Surveying	Environmental	Services				
☐ Health Services ☐ Mental Health	Services						
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting				
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract							
Managers, All other	2.00	281.00	\$299,100.00				
Social science research asst.	1.00	53.00	\$54,625.00				
Project Management Specialist	1.00	360.00	\$79,500.00				
Statistician	0.00	0.00	\$0.00				
Management Analysts         3.00         231.00         \$98,9			\$98,900.00				
Actuary 3.00 403.00			\$199,800.00				
	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	10.00	1,328.00	\$731,925.00				
Grand Total	10.00	1,328	\$731,925.00				

Name of person who prepared this report: Aisha Waheed	
Title: Vice President of Finance and Operations	Phone #: 203-906-3475
Title: Vice President of Finance and Operations  Preparer's Signature:	_
Date Prepared: 5/15/2025	

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting	State	Agency	Name:	OA
Contiducting	Otato	AGCITO	i vallic.	

Contract Number: C004482

ASAS

Contract Term: 09/01/2023 to 09/30/2025

Agency Business Unit: OAS01 Agency Department ID: 3670000

Contractor Name: BBG&G Advertising, Inc.

Contractor Address: 3020 Route 207, Suite 101, Campbell Hall, NY 10916

Description of Services Being Provided: Strategy, creative development research and

advertising for Prevention Media Campaign.

Scope of Contract (Choose one that b	est fits):				
☐ Analysis ☐ Evaluation ☐ Research ☐ Training					
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting					
☐ Engineering ☐ Architect Services	Surveying	g Environmental	Services		
☐ Health Services ☐ Mental Health Services					
☐ Accounting ☐ Auditing ☐ Paralegal ☐ Legal ☐ Other Consulting					
	Number of	Number of	Amount Payable		
Employment Category	Employees	Hours Worked	Under the Contract		
Chief Executive	1.00	57.25	\$17,175.00		
Operations Manager	1.00	58.50	\$11,700.00		
Marketing Manager	2.00	115.75	\$20,256.25		
Art Director	3.00	230.00	\$57,500.00		
Web Developer	1.00	7.00	\$1,295.00		
Writer	1.00	15.00	\$2,775.00		
Survey Researcher	2.00	16.00	\$5,250.00		
	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	499.50	\$115,951.25		
Grand Total					

Name of person who prepared this report: Peg
----------------------------------------------

Title: Director, Agency Operations

Phone #: 845-615-9084

Preparer's Signature: Regay Burnetti

Date Prepared: 5/15/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS  Contract Number: C004527 Agency Business Unit: OAS01  Contract Term: 04/01/2022 to 3/31/2027 Agency Department ID: 3670000  Contractor Name: Monroe Plan for Medical Care, Inc.  Contractor Address: 1120 Pittsford-Victor Rd., Pittsford, NY 14534  Description of Services Being Provided: Utilization Management for RRSY					
Scope of Contract (Choose one that best Analysis	arch Trair amming () Surveying brvices	Other IT consulting  Environmental \$			
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
Physician	0.25	520.00	\$103,320.00		
LMSW	1.00	2,080.00	\$74,264.00		
CASAC	0.25	520.00	\$14,588.00		
Clinical Operations Assistant	1.00	2,080.00	\$42,436.00		
IT / Data Analytics	0.30	624.00	\$27,052.00		
Project Accountant	0.25	520.00	\$13,752.00		
	0.00	0.00	\$0.00		
		2.22			
Fringe	0.00	0.00	\$96,392.00		
Fringe	0.00	0.00			
Fringe			\$96,392.00 \$0.00 \$0.00		
Fringe	0.00	0.00	\$0.00		
Fringe	0.00	0.00	\$0.00 \$0.00		
Fringe	0.00 0.00 0.00	0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00		
Fringe  Total this Page	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00		

### New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name. CASA	Contracting	State A	gency Name	: OASAS
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Contract Number: C006718 Agency Business Unit: OAS01
Contract Term: 9/01/2024 to 8/31/2025 Agency Department ID: 3670000

Contractor Name: Vibrant Emotion Health

Contractor Address: 80 Pine Street, 19th Floor, New York,

Description of Services Being Provided: Mental Health Services

Scope of Contract (Choose one that	•					
☐ Analysis ☐ Evaluation ☐ Research ☐ Training						
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting						
☐ Engineering ☐ Architect Services ☐ Surveying ☐ Environmental Services						
☐ Health Services ☐ Mental Health Services						
☐ Accounting ☐ Auditing ☐ Paralegal ☐ Legal ☐ Other Consulting						
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contrac						
QI Managers and QI Specialist	13.00	916.00	\$40,122.14			
Sr Workforce Managers and Analysts	4.00		\$26,111.48			
Senior Supervisors	13.00		\$32,658.15			
Admin (tech, office, data engineers)	10.00	493.00	\$31,154.51			
Operations Managers & Assistants	20.00		\$44,709.07			
Supervisors (Shift)	16.00	4,673.00	\$41,528.85			
Specialized Serv & prog Director/Assist Dir	27.00	1,587.00	\$134,810.64			
Clinical Staffr	24.00		\$232,223.20			
H2H VP	1.00		\$4,758.00			
Supervisors (other)	7.00	765.00	\$53,819.87			
(Crisis) Counselors	57.00	23,231.00	\$1,656,863.37			
H2H (Prog) Specialist	26.00		\$32,548.86			
Program mgr, coordinator, OP	7.00	927.00	\$98,253.22			
Total this Page	225.00	927.00	\$2,429,561.36			
Grand Total	225.00	32,592	\$2,429,561.36			

Name of person wr	o prepared this	s report: Julie	E. Kapadia
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Title: Senior Accountant Phone #: 646-509-3038

Prepare's Signature: Julie E. Kapadia

Preparer's Signature:

Date Prepared: 05/22/2025

### New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contract Number: C006852 Agency Business Unit: OASAS Agency Department ID: 3670000

Contract Term: 11/01/2024 to 10/31/2026 Contractor Name: KingFisher Services, LLC

Contractor Address: 124 North Broadway Scottdale, PA 15683

Description of Services Being Provided: Provide and support Leadership Academy

Scope of Contract (Choose one that best i	îts):		
Analysis Evaluation Resear	ch 🛛 Training		
☐ Data Processing ☐ Computer Progra.	mming	TT consulting	
☐ Engineering ☐ Architect Services	☐ Surveying ☐	] Environmental Services	
☐ Health Services ☐ Mental Health Ser	vices		
☐ Accounting ☐ Auditing ☐ Paraleg	gal 🗌 Legal	Other Consulting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
11-2021.00 Marketing Manager	1.00	160.00	\$8,320.00
15-1254.00 Web Developers	2.00	1,228.00	\$57,716.00
15-2051.00 Data Scientist	1.00	160.00	\$6,560.00
25-3099.00 Teacher & Instructor	4.00	1,148.00	\$48,216.00
43-6014.00 Administrative Assistant	1.00	400.00	\$9,600.00
	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	3,096.00	\$130,412.00
Grand Total	9.00	3,096	\$130,412.00

Ν	lame of	person who	prepared	this repo	rt: Kenneth	King
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Title: President

Preparer's Signature: Kenneth King

Date Prepared: 05/10/2025

Phone #: 724-640-5450

(Use additional pages, if necessary)

Page 1 of 1

### New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

	Contracting	State	Agency	Name:	OASAS
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Contract Number: C006853 Agency Business Unit: OAS01
Contract Term: 10/1/2024 to 9/30/2029 Agency Department ID: 3670000

Contractor Name: Holdrege Design LLC dba Idea Kraft Contractor Address: 45 Lewis Street, Binghamton, NY 13901

Description of Services Being Provided: Statewide Awareness Campaigns

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	ralegal 🗌 Leg	gal 🔲 Other Consul	ting		
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract					
11-1011-Chief Executive	1.00	41.10	\$6,165.00		
27-1024- Graphic Designer	1.00	49.23	\$7,384.50		
43-3031 Bookkeeping	1.00	1.75	\$262.50		
27-3043-Content Writer	1.00	39.44	\$5,916.00		
11-2011 Campaign Project Manager	1.00	16.75	\$2,512.50		
	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		
Total this Page	5.00	148.27	\$22,240.50		
Grand Total	5.00	148	22240.50		

Name of person who prepared this report: Ashley Depew

Title: Office Manager
Preparer's Signature:

Phone #: 607-235-5855 x 102

Date Prepared: 04/10/2025

(Use additional pages, if necessary)

☐ Analysis

☐ Data Processing

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS	
Contract Number: C006864	Agency Business Unit: OAS01
Contract Term: 10/01/2024 to 9/30/2029	Agency Department ID: 3670000
Contractor Name: Flywheel Film, LLC	
Contractor Address: 57 Turner Place #1, Brook	lyn, NY 11218
Description of Services Being Provided: Public	Awareness Campaigns

□ Training

☐ Other IT consulting

☐ Evaluation ☐ Research

Computer Programming

☐ Engineering ☐ Architect Set	rvices	Environmental :	Services
Health Services Mental H	lealth Services		
☐ Accounting ☐ Auditing [	☐ Paralegal ☐ Leg	ai 🛛 Other Co	73 s
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
27-1024.00	2.00	70.00	\$7,000.00
27-1014.00	2.00	50.00	\$5,000.00
27-4032.00	1.00	45.00	\$4,500.00
13-1082.00	1.00	40.00	\$4000.00
27-2012.00	2.00	730.00	\$36,500.00
11-2021.00	1.00	25.00	\$1,250.00
13-1161.00	1.00	20.00	\$1,000.00
27-4011.00	1.00	10.00	\$612.50
27-2011.00	2.00	16.00	\$2700.00
27-1011.00	2.00	40.00	\$4,000.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	15.00	1,046.00	\$66,562.50
Grand Total			

Name of person who prepared this report: Philip Sachs	
Title: Founding Producer	Phone #: 646-420-3668
Preparer's Signature:	
Date Prepared: 04/15/2025	

(Use additional pages, if necessary)

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASA
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Contract Number: C006933

Agency Business Unit: OAS01

Contract Term: 09/01/2024 to 08/31/2029

Agency Department ID: 3670000

Contractor Name: Dulcian Inc.

Contractor Address: 90 Avalon Drive Colonia, NJ 07067

Description of Services Being Provided: SABRS System Support

Scope of Contract (Choose one that be	est fits):				
☐ Analysis ☐ Evaluation ☐ Research ☐ Training					
☐ Data Processing ☐ Computer Pro	ogramming 🔲	Other IT consulting			
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services		
☐ Health Services ☐ Mental Health	Services				
☐ Accounting ☐ Auditing ☐ Pai	ralegal 🗌 Leg	pal	ting		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
15-1133 Software Developers	2.00	151.50	\$21,210.00		
	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	2.00	151.50	\$21,210.00		
Grand Total	2.00	151.5	\$21,210.00		

Name of person who prepared this report: Caryl Lee Fisher

Title: Corporation Secretary Lus the tris

Phone #: 212-595-7223

Preparer's Signature:

Date Prepared: 4/11/2025

### New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: NYS Office of Addiction Services and Supports

Contract Number: PH68613 Agency Business Unit: ABC01 Agency Department ID: 1020300

Contract Term: 07/01/2019 to 06/30/2029 Contractor Name: Knowledge Builders Inc.

Contractor Address: 1977 Western Avenue, Suite 1, Albany, NY - 12203

Description of Services Being Provided: IT Specialist, Software Developer, Software Architect,

Scope of Contract (Choose one that best	fits):		
	ch Training		
□ Data Processing    □ Computer Progra	mming	r IT consulting	
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental Services	
☐ Health Services ☐ Mental Health Ser	vices		
☐ Accounting ☐ Auditing ☐ Parale	gal 🗌 Legal	Other Consulting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
15-1232.00 / IT Specialist	3.00	2,519.00	\$208,522.83
15-1252.00 / Software Developer	2.00	2,864.00	\$209,014.72
15-1299.08 / Software Architect	1.00	1,824.00	\$168,154.56
OCHBIT13204	1.00	1,637.00	\$157,659.47
OCHBITS13651	1.00	568.00	\$43,974.56
OCHBIT13840	1.00	104.00	\$9,874.80
	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	9,516.00	\$797,200.94
Grand Total	9.00	9,516	\$797,200.94

Name of person who prepared th	is report: Sanjay Kapalli	
Title: Executive Vice President	Klamm	Phone #: (518) 250-4189
Preparer's Signature:	(1) March	
Date Prepared: 05/02/2025		

### New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: Office of Addiction Services & Supports

Contract Number: PH68617 Agency Business Unit: OAS01 Contract Term: 7/1/2019 to 6/30/2029 Agency Department ID: 3670000

Contractor Name: MVP Consulting Plus, Inc.

Contractor Address: 401 New Karner Rd., 3rd Fl., Albany, NY 12205 Description of Services Being Provided: IT Consulting Services

Scope of Contract (Choose one that	•		
☐ Analysis ☐ Evaluation ☐ I	Research 🗌	Training	
☐ Data Processing ☐ Computer	Programming	Other IT consulting	ng
☐ Engineering ☐ Architect Service	ces 🗌 Surve	ying 🔲 Environme	ental Services
☐ Health Services ☐ Mental Heal	th Services		
☐ Accounting ☐ Auditing ☐	Paralegal	Legal 🔲 Other C	onsulting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
15-1199.09	1.00	164.00	\$14102.36
15-1199.09	1.00	1995.00	\$176697.15
15-1199.09	2.00	1408.00	\$128437.76
	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	3567.00	\$319237.27
Grand Total	4.00	3567.00	\$319237.27

Name of person who prepared this report: Nancy Gordon

Title: Contract Manager Phone #: 518-218-1700

Preparer's Signature:

Date Prepared: 5/6/2025

(Use additional pages, if necessary)

### New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PH68620 Agency Business Unit: OAS01
Contract Term: 7/1/2019 to 6/30/2029 Agency Department ID: 3670000

Contractor Name: Panha Solutions Inc

Contractor Address: 1659 Central Ave, Ste 103, Albany, NY 12205

Description of Services Being Provided: Hourly Based Information Technology

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	ralegal 🗌 Leç	gal 🔲 Other Consul	ting		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
Software Architect (OCHBIT12504, OCHBIT13219, OCHBIT13262)	3.00	6,042.25	\$560,766.78		
	0.00	0.00	\$0.00		
Software Developer (OCHBIT13245)	1.00	2,010.00	\$171,030.90		
	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	8,052.25	\$731,797.68		
Grand Total	4.00	8,052	\$731,797.68		

Name o	t person wh	o prepared	this report:	Milinda P	Puvvada
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Title: CEO Phone #: 518-878-7457

Preparer's Signature: P. Milinda Panka

Date Prepared: 5/15/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: Office Contract Number: PH68629	e of Addiction Serv	ices and Support		
Agency Business Unit: OAS01				
Agency Department ID: 3670000				
	/ 30 / 29			
Contractor Name: <b>Tech Valley Talent</b> , L				
Contractor Address: 1360 Kania Road,		12010 and		
20 Prospect St., E				
Description of Services Being Provided:	II Staff Augment	ation; II Professional	Services	
Soons of Contract (Change one that heat t	Fito\:			
Scope of Contract (Choose one that best to	•			
☐ Analysis ☐ Evaluation ☐ Research	3			
☐ Data Processing X Computer Program	•	consulting		
	, 0	Environmental Services		
☐ Health Services ☐ Mental Health Servi		011		
☐ Accounting ☐ Auditing ☐ Paralega	l □ Legal □  Number of	Other Consulting  Number of	Amount Payable	
Employment Category	Employees	Hours Worked	Under the Contract	
15-1232.00 Computer Support	1.0	1625.5	121,733.70	
Specialists (OCHBIT13335)	1.0	1020.0	121,700.70	
Total this Page	1.0	1625.5	121,733.70	
Grand Total	1.0	1625.5	121,733.70	
Name of person who prepared this report	t: Rene Guzek			
Title: VP of Operations Phone #: 518-882-0001 x112				
Preparer's Signature: Rens Guzes	k			
Date Prepared: 5/14/2025				
(Use additional pages, if necessary)			Page of	
(USE auditional pages, il fielessary)				

### New York State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name:	NYS Office of Alco	sholism & Substance Abi	ise Svcs			
Contract Number: PN691AB		Agency Business Unit: 0				
		Agency Department ID:	0			
Contract Term: 8/11/2021 Contractor Name: New York State 1	To echnology Enterprise	12/31/2025 Corporation (NYSTEC	)			
Contractor Address: 99 Otls Street,	2 <sup>nd</sup> Floor, Rome, NY 1	3441				
Description of Services Being Provid	ed: NYS OASAS RI	FP, IV&V & Security Ass	stance for EHR Systen	n		
Scope of Contract (Choose one th	at best fits):					
Analysis Evaluation	Research	Training				
Data Processing Computer Programmin	g Other IT Consulting					
Engineering Architect Services	Surveying	Environmental Services				
Health Services Mental Health Services						
Accounting Auditing	Paralegal	Legal	Other Consulting			
				ji		
Employment Category		Number of Employees	Number of hours to be worked	Amount Payable Under the Contract		
11-3021.00 Computer and Information S	ystems Manager	7.00	1,116.25	\$ 212,261.22		
Total this page		7.00	1,116.25	\$ 212,261.22		
Total this page	Grand Total	7.00	1,116.25	\$ 212,261.22		
	Granu Total	7.00	1,110.25	Ψ 212,201.22		
Name of person who prepared this re	port: <b>Michael J. Tallm</b>	an				

Mul Stella

Preparer's Signature:

Title: Contracts Manager

Date Prepared: 04-28-2025

(Use additional pages, if necessary)

Page 1 of 1

Phone #: 315-334-7843 mtaliman@nystec.com

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: QASAS					
Contract Number: PO# 6529 Agency Business Unit: OAS01					
Contract Term: 4/1/24 to 3 /3/	125	Agency Department	ID: 3670000		
Contractor Name: Michael Giammarr	ino dba Languaç	ge Today			
Contractor Address: 520 Green Mour	ntain Road, Mah	way, NY 07430			
Description of Services Being Provide	ed: Inte	erpreting Ser	vices		
Scope of Contract (Choose one that be	est fits):				
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Tra	ining			
☐ Data Processing ☐ Computer Pro	ogramming	Other IT consulting			
☐ Engineering ☐ Architect Services	Surveying	g Environmental	Services		
☐ Health Services ☐ Mental Health	Services				
Accounting Auditing Paralegal Legal Other Consulting					
Employment Category	Number of	Number of	Amount Payable		
	Employees	Hours Worked	Under the Contract		
Interpretion Services	1	712.5	\$ 52,725.00		
	0.00	0.00	\$0.00		

	Employees	Hours Worked	Officer the Contract
Interpretion Services	l	712.5	\$ 52,725.00
1 3	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
To a special section of	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	0.00	0.00	\$ 0.00
Grand Total			

Name of person who prepared this repo	rt:	"	201-981-4738
Title: President Preparer's Signature: Michael	01.	Phone #:	201 901-4130
	Granmarino		
Date Prepared: 5 16 1 25			Dogo / of /
(Use additional pages, if necessary)			Page / of /
(Ose additional pages, in necessary)			

St. Lawrence ATC

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6530 Agency Business Unit: OAS01
Contract Term: 10/25/2022 to 10/26/2025 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

Scope of Contract (Choose one that best fits):					
☐ Analysis ☐ Evaluation ☐ Research ☐ Training					
☐ Data Processing ☐ Computer Pro	ogramming [	Other IT consulting			
☐ Engineering ☐ Architect Services	Surveying	Environmental	Services		
	Services				
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
29-1141.00	0.00	0.00	\$0.00		
29-2061.00	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	0.00	0.00	\$ 0.00		
Grand Total	0.00	0.00	\$0.00		

Name of person who prepared this report: Arman Dhar	
Title: Senior Vice President - Operations	Phone #: (315) 512-5893
Preparer's Signature:	
Date Prepared: 04/28/2025	

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6533 Agency Business Unit: OAS01
Contract Term: 10/25/2022 to 10/26/2025 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

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 Paralegal Legal Other Consulting					
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
29-1141.00	0.00	0.00	\$0.00		
29-2061.00	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	0.00	0.00	\$ 0.00		
Grand Total	0.00	0.00	\$0.00		

Name of person who prepared this report: Arman Dhar	
Title: Senior Vice President - Operations	Phone #: (315) 512-5893
Preparer's Signature:	-
Date Prepared: 04/28/2025	

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6536 Agency Business Unit: OAS01 Contract Term: 4/1/2023 to 2/5/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

Scope of Contract (Choose one that best fits):					
☐ Analysis ☐ Evaluation ☐ Research ☐ Training					
☐ Data Processing ☐ Computer Pro	☐ Data Processing ☐ Computer Programming ☐ Other IT consulting				
☐ Engineering ☐ Architect Services	s 🔲 Surveying	g Environmental	Services		
	Services				
☐ Accounting ☐ Auditing ☐ Pa	ıralegal 🔲 Leg	gal 🔲 Other Consul	ting		
	Number of	Number of	Amount Payable		
Employment Category	Employees	Hours Worked	Under the Contract		
	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	0.00	0.00	\$ 0.00		
Grand Total	0.00	0	\$0.00		

Ν	lame of	person who	prepared	this i	report:	LaShone	Sweenev
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Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager LaShone Sweeney

Preparer's Signature:

Date Prepared: 5/1/2025

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6537 Agency Business Unit: OAS01 Contract Term: 4/1/2023 to 2/5/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Registered Nurses

Scope of Contract (Choose one that best fits):						
☐ Analysis ☐ Evaluation ☐ Research ☐ Training						
☐ Data Processing ☐ Computer Pro	☐ Data Processing ☐ Computer Programming ☐ Other IT consulting					
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services			
	Services					
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting			
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
RN	12.00	3,546.75	\$371,559.38			
	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	12.00	3,546.75	\$371,559.38			
Grand Total	12.00	3,546	\$371,559.38			

Name of pe	erson who	prepared th	is report:	LaShone Sweene	v
------------	-----------	-------------	------------	----------------	---

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager LaShone Sweeney

Preparer's Signature:

Date Prepared: 5/1/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6540 Agency Business Unit: OAS01
Contract Term: 10/25/2022 to 10/26/2025 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

Scope of Contract (Choose one that b	est fits):			
☐ Analysis ☐ Evaluation ☐ Research ☐ Training				
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting				
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services	
	Services			
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🗌 Leg	gal 🔲 Other Consul	ting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
29-1141.00	0.00	0.00	\$0.00	
29-2061.00	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	0.00	0.00	\$ 0.00	
Grand Total	0.00	0.00	\$0.00	

Name of person who prepared this report: Arman Dhar	
Title: Senior Vice President - Operations	Phone #: (315) 512-5893
Preparer's Signature:	
Date Prepared: 04/28/2025	

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6543 Agency Business Unit: OAS01
Contract Term: 10/25/2022 to 10/26/2025 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

Scope of Contract (Choose one that b	est fits):			
☐ Analysis ☐ Evaluation ☐ Research ☐ Training				
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting				
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services	
	Services			
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
29-1141.00	0.00	0.00	\$0.00	
29-2061.00	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	0.00	0.00	\$ 0.00	
Grand Total	0.00	0.00	\$0.00	

Name of person who prepared this report: Arman Dhar	
Title: Senior Vice President - Operations	Phone #: (315) 512-5893
Preparer's Signature:	
Date Prepared: 04/28/2025	

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6546 Agency Business Unit: OAS01 Contract Term: 4/1/2023 to 2/5/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

Scope of Contract (Choose one that b	est fits):			
☐ Analysis ☐ Evaluation ☐ Res	search 🔲 Tra	ining		
☐ Data Processing ☐ Computer Pro	ogramming	Other IT consulting		
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services	
	Services			
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
	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	0.00	0.00	\$ 0.00	
Grand Total	0.00	0	\$0.00	

name of person who	prepared this report:	LaSnone Sweeney
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Phone #: (718) 643-4880 ext. 108

Title: Human Resources Manager

LaShone Sweeney Preparer's Signature:

Date Prepared: 5/1/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting	State	Agency	/ Name:	OASAS
Contracting	Olaic	Auciici	, inallic.	$O \cap O \cap O$

Contract Number: PO#6550 Agency Business Unit: OAS01
Contract Term: 10/25/2022 to 10/26/2025 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

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		
	Services				
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting		
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract					
29-1141.00	0.00	0.00	\$0.00		
29-2061.00	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	0.00	0.00	\$ 0.00		
Grand Total	0.00	0.00	\$0.00		

Name of person who prepared this report: Arman Dhar	
Title: Senior Vice President - Operations	Phone #: (315) 512-5893
Preparer's Signature:	-
Date Prepared: 04/28/2025	

### New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6551 Agency Business Unit: OAS01
Contract Term: 4/1/2023 to 2/5/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Licensed Practical Nurses

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	
	Services			
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
LPN	3.00	114,376.25	\$230,813.75	
	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	
Total this Page	3.00	114,376.25	\$230,813.75	
Grand Total	3.00	114,376	\$230,813.75	

Name of person who prepared this report: LaShone Sweeney

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager

Preparer's Signature: <u>La Shone Sweeney</u>

Date Prepared: 5/1/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6554 Agency Business Unit: OAS01
Contract Term: 10/25/2022 to 10/26/2025 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

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		
	Services				
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting		
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract					
29-1141.00	0.00	0.00	\$0.00		
29-2061.00	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	0.00	0.00	\$ 0.00		
Grand Total	0.00	0.00	\$0.00		

Name of person who prepared this report: Arman Dhar	
Title: Senior Vice President - Operations	Phone #: (315) 512-5893
Preparer's Signature:	
Date Prepared: 04/28/2025	

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6558 Agency Business Unit: OAS01
Contract Term: 10/25/2022 to 10/26/2027 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

Scope of Contract (Choose one that b	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		
	Services				
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
29-1141.00	0.00	0.00	\$0.00		
29-2061.00	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	0.00	0.00	\$ 0.00		
Grand Total	0	0	\$0.00		

Name of person who prepared this report: Arman Dhar	
Title: Senior Vice President - Operations	Phone #: (315) 512-5893
Preparer's Signature:	
Date Prepared: 04/28/2025	

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6561 Agency Business Unit: OAS01
Contract Term: 4/1/2023 to 2/5/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

Scope of Contract (Choose one that best fits):					
☐ Analysis ☐ Evaluation ☐ Research ☐ Training					
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting					
☐ Engineering ☐ Architect Services	s 🔲 Surveying	g Environmental	Services		
⊠ Health Services ☐ Mental Health	Services				
☐ Accounting ☐ Auditing ☐ Pa	ıralegal 🔲 Leg	gal 🔲 Other Consul	ting		
	Number of	Number of	Amount Payable		
Employment Category	Employees	Hours Worked	Under the Contract		
	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	0.00	0.00	\$ 0.00		
Grand Total	0.00	0	\$0.00		

Na	me of	person	who	prepared	this	report:	LaShone	Sweenev
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Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager

Preparer's Signature: LaShone Sweeney

Date Prepared: 5/1/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6562 Agency Business Unit: OAS01
Contract Term: 10/25/2022 to 10/26/2025 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

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		
	Services				
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting		
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract					
29-1141.00	0.00	0.00	\$0.00		
29-2061.00	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	0.00	0.00	\$ 0.00		
Grand Total	0.00	0.00	\$0.00		

Name of person who prepared this report: Arman Dhar	
Title: Senior Vice President - Operations	Phone #: (315) 512-5893
Preparer's Signature:	
Date Prepared: 04/28/2025	

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6564 Agency Business Unit: OAS01
Contract Term: 4/1/2023 to 2/5/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

Scope of Contract (Choose one that b	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	
	Services			
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting	
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract				
	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	0.00	0.00	\$ 0.00	
Grand Total	0.00	0	\$0.00	

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager

Preparer's Signature: <u>La Shone Sweeney</u>

Date Prepared: 5/1/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6567 Agency Business Unit: OAS01
Contract Term: 10/25/2022 to 10/26/2027 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

Description of Services Being Provided: RN and LPN

Scope of Contract (Choose one that best fits):			
☐ Analysis ☐ Evaluation ☐ Research ☐ Training			
☐ Data Processing ☐ Computer Pro	ogramming [	Other IT consulting	
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services
	Services		
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🗌 Leç	gal 🔲 Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1141.00	0.00	0.00	\$0.00
29-2061.00	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	0.00	0.00	\$ 0.00
Grand Total	0	0	\$0.00

Name of person who prepared this report: Arman Dhar	
Title: Senior Vice President - Operations	Phone #: (315) 512-5893
Preparer's Signature:	
Date Prepared: 04/28/2025	

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6570 Agency Business Unit: OAS01
Contract Term: 4/1/2023 to 2/5/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

Scope of Contract (Choose one that best fits):				
☐ Analysis ☐ Evaluation ☐ Research ☐ Training				
☐ Data Processing ☐ Computer Pro	ogramming 🔲	Other IT consulting		
☐ Engineering ☐ Architect Services	Surveying	g Environmental S	Services	
	Services			
☐ Accounting ☐ Auditing ☐ Par	ralegal 🔲 Leg	gal 🔲 Other Consult	ting	
	Number of	Number of	Amount Payable	
Employment Category	Employees	Hours Worked	Under the Contract	
	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	0.00	0.00	\$ 0.00	
Grand Total	0.00	0	\$0.00	

Name of person who prepared this report: LaShone Sweeney

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager

Preparer's Signature: <u>La Shone Sweeney</u>

Date Prepared: 5/1/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6572 Agency Business Unit: OAS01
Contract Term: 10/25/2022 to 10/26/2027 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

Description of Services Being Provided: RN and LPN

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 Paralegal Legal Other Consulting					
Employment Category	Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract				
29-1141.00	0.00	0.00	\$0.00		
29-2061.00	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	0.00	0.00	\$ 0.00		
Grand Total	0	0	\$0.00		

Name of person who prepared this report: Arman Dhar	
Title: Senior Vice President - Operations	Phone #: (315) 512-5893
Preparer's Signature:	
Date Prepared: 04/28/2025	

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6574 Agency Business Unit: OAS01
Contract Term: 4/1/2023 to 2/5/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

Scope of Contract (Choose one that best fits):				
☐ Analysis ☐ Evaluation ☐ Research ☐ Training				
☐ Data Processing ☐ Computer Pro	ogramming 🔲	Other IT consulting		
☐ Engineering ☐ Architect Services	Surveying	g Environmental S	Services	
	Services			
☐ Accounting ☐ Auditing ☐ Par	ralegal 🔲 Leg	gal 🔲 Other Consult	ting	
	Number of	Number of	Amount Payable	
Employment Category	Employees	Hours Worked	Under the Contract	
	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	0.00	0.00	\$ 0.00	
Grand Total	0.00	0	\$0.00	

Name of person who prepared this report: LaShone Sweeney

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager

Preparer's Signature: <u>La Shone Sweeney</u>

Date Prepared: 5/1/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6576 Agency Business Unit: OAS01
Contract Term: 10/25/2022 to 10/26/2025 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

Description of Services Being Provided: RN and LPN

Scope of Contract (Choose one that best fits):				
☐ Analysis ☐ Evaluation ☐ Research ☐ Training				
☐ Data Processing ☐ Computer Pro	ogramming [	Other IT consulting		
☐ Engineering ☐ Architect Services	Surveying	g Environmental S	Services	
	Services			
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🗌 Leg	gal 🔲 Other Consult	ting	
	Number of	Number of	Amount Payable	
Employment Category	Employees	Hours Worked	Under the Contract	
29-2061.00	1.00	178.40	\$9,615.78	
	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	1.00	178.40	\$9,615.78	
Grand Total	0.00	0.00	\$0.00	

Name of person who prepared this report: Arman Dhar	
Title: Senior Vice President - Operations	Phone #: (315) 512-5893
Preparer's Signature:	
Date Prepared: 04/28/2025	

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6578 Agency Business Unit: OAS01
Contract Term: 4/1/2023 to 2/5/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Registered Nurses

Scope of Contract (Choose one that b	est fits):			
☐ Analysis ☐ Evaluation ☐ Research ☐ Training				
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting				
☐ Engineering ☐ Architect Services ☐ Surveying ☐ Environmental Services				
	Services			
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting	
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract				
RN	1.00	191.50	\$14,362.50	
	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	
Total this Page	1.00	191.50	\$14,362.50	
Grand Total	1.00	191	\$14,362.50	

Name of person who prepared this report: LaShone Sweeney

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager

Preparer's Signature: <u>La Shone Sweeney</u>

Date Prepared: 5/1/2025

## New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6582 Agency Business Unit: OAS01
Contract Term: 4/1/2023 to 2/5/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Registered Nurses

Scope of Contract (Choose one that b	est fits):			
☐ Analysis ☐ Evaluation ☐ Research ☐ Training				
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting				
☐ Engineering ☐ Architect Services ☐ Surveying ☐ Environmental Services				
	Services			
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting	
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract				
RN	0.00	507.75	\$95,203.13	
	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	0.00	507.75	\$95,203.13	
Grand Total	0.00	507	\$95,203.13	

Name of person who prepared this report: LaShone Sweeney

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager

Preparer's Signature: LaShone Sweeney

Date Prepared: 5/1/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#6975 Agency Business Unit: OAS01
Contract Term: 9/15/2023 to 3/31/2025 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 1501 Broadway, 12<sup>th</sup> Floor, New York, NY 10036 Description of Services Being Provided: Food Preparation Workers

Scope of Contract (Choose one that be Analysis	search	ining Other IT consulting ☐ Environmental	Services	
☐ Accounting ☐ Auditing ☐ Paralegal ☐ Legal ☐ Other Consulting				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
35-2021.00	13.00	19,743.00	\$ 462,497.75	
	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	
Total this Page	13.00	19,743.00	\$462,497.75	
Grand Total				

Name of person who prepared this report: Arman Dhar	
Title: Senior Vice President - Operations	Phone #: (315) 512-5893
Preparer's Signature:	
Date Prepared: 05/02/2025	

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS	
Contract Number: PO# 7244	Agency Business Unit: OAS01
Contract Number: PO# 7244  Contract Term: 4 /1 /24 to 3 /31 / 25	Agency Department ID: 3670000
Contractor Name: Michael Giammarrino dba Lang	guage Today
Contractor Address: 520 Green Mountain Road, I Description of Services Being Provided:	Mahway, NY 07430  Trenng Services
Description of dervices being i revided.	

Scope of Contract (Choose one that be	est fits):		
☐ Analysis ☐ Evaluation ☐ Res	search Tra	ining	
☐ Data Processing ☐ Computer Pro	ogramming [	Other IT consulting	
☐ Engineering ☐ Architect Services	Surveying	Environmental	Services
☐ Health Services ☐ Mental Health	Services		
☐ Accounting ☐ Auditing ☐ Pa	ralegal Leg	gal	lting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Interpreting Services	0	0	0
7	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
1172/61	0.00	0.00	\$0.00
Pri St. Co.	0.00	0.00	\$0.00
100	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Fe 20 12 1000 10 10	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	0.00	0.00	\$ 0.00
Grand Total			

Name of person who prepared this report:  Title: President  Preparer's Signature: Muchael Miannarius	Phone #:	201-981-4738
Date Prepared: 5161 25		Page of

### New York State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: Contract Number: PO#7245 Contract Term: 11/15/2023 to 3 Contractor Name: Geneva Worldwi Contractor Address: 228 Park Ave. Description of Services Being Provi	/31/2025 ide, Inc. S. PMB 27669	Agency Business t Agency Departmer New York, NY 10003	nt ID: 3670000
☐ Data Processing ☐ Computer F☐ Engineering ☐ Architect Services ☐ Mental Healt	desearch		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
	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  Grand Total	0.00		

Contracting State Agency Name: OASAS

Contract Number: PO# 7249

#### FORM B

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contract Term: 4 / 1 / 34 to 3 /3	125	Agency Department	ID: 3670000		
Contractor Name: Michael Giammarr	ino dba Langua	ge Today			
Contractor Address: 520 Green Mour	Contractor Address: 520 Green Mountain Road, Mahway, NY 07430				
Description of Services Being Provided: Interpreting Services					
Scope of Contract (Choose one that b	est fits):				
Analysis Evaluation Re	search 🔲 Tra	ining			
☐ Data Processing ☐ Computer Pr	ogramming	Other IT consulting			
☐ Engineering ☐ Architect Services	S Surveying	g Environmental	Services		
☐ Health Services ☐ Mental Health	Services				
Accounting Auditing Pa	aralegal 🔲 Le	gal Other Consu	lting		
Employment Category	Number of	Number of	Amount Payable		
	Employees	Hours Worked	Under the Contract		
along and remove a large	N=044904 200-2  200-200-200				
Interpreting Services	0	0	0		
Interpreting Services	7.500.000 - 10.50 - 0.500 - 0.500	0.00	\$0.00		
Interpreting Services	0	0	0		
Interpreting Services	0.00	0.00	\$0.00		
Interpreting Services	0.00	0.00	\$0.00 \$0.00		
Interpreting Services	0.00 0.00 0.00	0.00 0.00 0.00	\$0.00 \$0.00 \$0.00		
Interpreting Services	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00		
Interpreting Services	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		
Interpreting Services	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		
Interpreting Services	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		
Interpreting Services	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		
Interpreting Services	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		

0.00

Name of person who prepared this report:

Total this Page

**Grand Total** 

Title: President

0.00

Agency Business Unit: OAS01

Phone #: 201 - 981 - 4738

\$ 0.00

Preparer's Signature: Muchael

Gammarino

Date Prepared: 5/6/25

Page of

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting	State	Agency	Name:	OASAS
CAULTE BUSINESS	Own	AUGILLA	TEST IV.	

Contract Number: PO#7250 Agency Business Unit: OAS01

Contract Term: 11/15/2023 to 3/31/2025 Agency Department ID: 3670000

Contractor Name: American Sign Language Inc.

Contractor Address: 1412 Broadway, #2118, New York, NY 10018 Description of Services Being Provided: Interpreting Services

Scope of Contract (Choose one that b	•		
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Train	•	
☐ Data Processing ☐ Computer Pro	ogramming 🔲 🤇	Other IT consulting	
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental :	Services
☐ Health Services ☐ Mental Health	Services		
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Lega	al Other Consult	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
	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	0.00	0.00	\$ 0.00
Grand Total			

Name of person wh	o prepared this re	port: Dana Steele
-------------------	--------------------	-------------------

Title: Interpreter Coordinator Phone #: (212) 477-0775

Preparer's Signature:

**Date Prepared: 4/16/2025** 

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contract Number: PO#7251 Contract Term: 11/15/2023 to 3/3 Contractor Name: Global Employme Contractor Address: 45 Ashgrove La Description of Services Being Providence	31/2025 ent Services, Inc. ane, Selkirk, NY 12	Agency Business Ur Agency Department 2158	
☐ Data Processing ☐ Computer P☐ Engineering ☐ Architect Service ☐ Health Services ☐ Mental Healt	esearch	Other IT consulting  Environmental	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
27-3091.00	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
	1		
	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 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00
Total this Page	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

Contracting State Agency Name: OASAS

#### FORM B

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contract Number: PO# 72.53 Contract Term: 4/1/24 to 3/3	1,25	Agency Business Un Agency Department	
		0 1 .	D. 3070000
Contractor Name: Michael Giammarr			
Contractor Address: 520 Green Mour			
Description of Services Being Provide	ed: Inter	meting DVS	
	1	)	
Scope of Contract (Choose one that b	oct fitc):		
		ining	
Data Processing Computer Processing		Other IT consulting	
Engineering Architect Services		☐ Environmental	Services
☐ Health Services ☐ Mental Health	No Table	_	
Accounting Auditing Pa	ralegal Leg		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Interpreting Services	0	0	0
	0.00	0.00	\$0.00
The second secon	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	A THE VALUE OF THE PARTY OF THE
		The second secon	A THE VALUE OF THE PARTY OF THE
	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 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00
Total this Page	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

Name of person who prepared this report: Title: President

Preparer's Signature: M Date Prepared: 516125

Phone #: 201 - 981 - 4738

Page / of /

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contract Number: PO#7254 Contract Term: 11/15/2023 to 3/Contractor Name: Global Employme Contractor Address: 45 Ashgrove L Description of Services Being Provi	31/2025 ent Services, Inc. ane, Selkirk, NY 12	Agency Business Ur Agency Department 2158	
☐ Data Processing ☐ Computer F☐ Engineering ☐ Architect Service☐ Health Services ☐ Mental Health	esearch 🗍 Trail Programming 🗍 es 📗 Surveying	Other IT consulting  Environmental S	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
27-3091.00	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
			60.00
	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	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

### **New York State Consultant Services Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#7255 Agency Business Unit: OAS01 Contract Term: 11/15/2023 to 3/31/2025 Agency Department ID: 3670000

Contractor Name: American Sign Language Inc.

Contractor Address: 1412 Broadway, #2118, New York, NY 10018 Description of Services Being Provided: Interpreting Services

Scope of Contract (Choose one that	best fits):		
☐ Analysis ☐ Evaluation ☐ Re	esearch 🔲 Trair	ning	
☐ Data Processing ☐ Computer P	rogramming 🔲	Other IT consulting	
☐ Engineering ☐ Architect Service	s 🔲 Surveying	Environmental	Services
☐ Health Services ☐ Mental Healt	h Services		
☐ Accounting ☐ Auditing ☐ P	aralegal 🔲 Lega	al	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
	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	0.00	0.00	\$ 0.00
Grand Total			

Name	OT	person	wno	prepared	tnis	report:	Dana	Steele

Title: Interpreter Coordinator Preparer's Signature:

Phone #: (212) 477-0775

Date Prepared: 4/16/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS	
Contract Number: PO# 7256 Contract Term: 4 /1 / 24 to 3/3// 25 Contractor Name: Michael Giammarrino dba Lang	Agency Business Unit: OAS01 Agency Department ID: 3670000
Contractor Name: Michael Glammarino doa Lang Contractor Address: 520 Green Mountain Road, M Description of Services Being Provided:	Jahway NY 07430
Scope of Contract (Choose one that best fits):	

Scope of Contract (Choose one that b	est fits):		
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Tra	ining	
☐ Data Processing ☐ Computer Pr	ogramming [	Other IT consulting	
☐ Engineering ☐ Architect Service	s Surveying	g Environmental	Services
☐ Health Services ☐ Mental Health	Services		
☐ Accounting ☐ Auditing ☐ Pa	aralegal 🔲 Le	gal	lting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Interpreting SVS.	0	0	0
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
70-1-1-1	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
2 -4	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
- 67512.6°C	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	0.00	0.00	\$ 0.00
Grand Total			

Name of person who prepared this report:  Title: President  Preparer's Signature: Michael Hannary	Phone #:	201-981-4738
Date Prepared: 5/6/25		Page of
(Use additional pages, if necessary)		rage or /

NYC ASL

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: C	)ASAS	ì
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Contract Number: PO#7257

Agency Business Unit: OAS01

Contract Term: 11/15/2023 to 3/31/2025

Agency Department ID: 3670000

Contractor Name: Bilingual Professional Agency, Inc.

Contractor Address: 1663 East 17th Street, Brooklyn, NY 11229

Description of Services Being Provided: Sign Language Interpreting Services

	ANY RESERVED TO SELECT THE PROPERTY OF THE PRO		
Scope of Contract (Choose one that b	est fits):		
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Tra	ining	
☐ Data Processing ☐ Computer Pr	ogramming [	Other IT consulting	
☐ Engineering ☐ Architect Services	s Surveying		Services
☐ Health Services ☐ Mental Health			
☐ Accounting ☐ Auditing ☐ Pa	aralegal Leg	gal 🛛 Other Consu	lting
	Number of	Number of	Amount Payable
Employment Category	Employees	Hours Worked	Under the Contract
Interpreters and Translators	59.00	1,561.07	\$133,885.00
	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	59.00	1,561.07	\$133,885.00
Grand Total	59.00	1,561	\$133,885.00

Name of person who prepared this report: Aaron S. Rayman

Title: Controller

Phone #: 347-943-7551

Preparer's Signature:

Date Prepared: 04/16/25

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#7258 Agency Business Unit: OAS01
Contract Term: 11/15/2023 to 3/31/2025 Agency Department ID: 3670000

Contractor Name: American Sign Language Inc.

Contractor Address: 1412 Broadway, #2118, New York, NY 10018
Description of Services Being Provided: Interpreting Services

Scope of Contract (Choose one that b	est fits):		
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Train	ning	
☐ Data Processing ☐ Computer Pr	rogramming 🔲	Other IT consulting	
☐ Engineering ☐ Architect Service	s Surveying	Environmental	Services
☐ Health Services ☐ Mental Health	Services		
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Lega	al Souther Consult	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
	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	0.00	0.00	\$ 0.00
Grand Total			

Haille	OI	herson	MIIO	hie	haiea	uiis	report.	DANA	DIRETE

Title: Interpreter Coordinator Phone #: (212) 477-0775

Preparer's Signature:

**Date Prepared: 4/16/2025** 

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OA Contract Number: PO# 72.88	SAS	Agency Business Ur	nit: OAS01
Contract Term: 4 / 1 / 24 to 3 /3	1125	Agency Department	
Contractor Name: Michael Giammar			
Contractor Address: 520 Green Mou	ntain Road Mahy	Nav NV 07/30	
Description of Services Being Provid	ed: Interp	reting Service	æ5
		J	
S	+ 5:4-).		
Scope of Contract (Choose one that b			
	esearch		
☐ Data Processing ☐ Computer Pr		Other IT consulting	Opportune
☐ Engineering ☐ Architect Service		Environmental	Services
Health Services Mental Health		al Dothan Canaul	4:
Accounting Auditing Pa	aralegal Leg	al Other Consu	Amount Payable
Employment Category	Employees	Hours Worked	Under the Contract
Interpreting Services	0	0	0
1. 0	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Net 1	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	1.00.000	
	0.00	0.00	\$0.00
		100	\$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  Grand Total	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

Blaisdell Atc

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contract Number: PO# 7290 Contract Term: 4 / 1 / 24 to 3 /3	1,25	Agency Business Ur Agency Department	
Contractor Name: Michael Giammarr			15. 0070000
Contractor Address: 520 Green Mau	ntain Boad Mah	WOV NV 07430	
Description of Services Being Provid	ed: Interp	reting Service	105
0	4 6'4 - 1		
Scope of Contract (Choose one that b			
		ning	
☐ Data Processing ☐ Computer Pr		Other IT consulting	
☐ Engineering ☐ Architect Services		☐ Environmental	Services
☐ Health Services ☐ Mental Health	(/ <del></del>	. Поп. о	
	aralegal Leg	gal Other Consu	
Employment Category	Employees	Hours Worked	Amount Payable Under the Contract
Interpreting Services	0	0	0
. 1	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
— Ta	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	1 0001	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	\$0.00 \$0.00 \$0.00 \$0.00
Total this Page Grand Total	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

Page of

(Use additional pages, if necessary)

Date Prepared: 5/6/25

Ward ATE

Contracting State Agency Name: OASAS

Contract Number: PO# 7491 Contract Term: 4 / / / 24 to 3/5// 25

#### FORM B

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Agency Business Unit: OAS01
Agency Department ID: 3670000

Contractor Address: 520 Green Mou	ntain Road, Mah	way, NY 07430					
Description of Services Being Provided: Interpreting Services							
Scope of Contract (Choose one that b	est fits):						
☐ Analysis ☐ Evaluation ☐ Re	esearch Tra	ining					
☐ Data Processing ☐ Computer Pr	rogramming [	Other IT consulting					
☐ Engineering ☐ Architect Service	s Surveying	☐ Environmental	Services				
☐ Health Services ☐ Mental Health	n Services						
☐ Accounting ☐ Auditing ☐ Pa	aralegal 🔲 Leg	gal	Iting				
Employment Category	Number of	Number of	Amount Payable				
	Employees	Hours Worked	Under the Contract				
Interpreting Services	2	2,225,5	\$ 99,411.63				
	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				
F.F 15h .	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
2 - 1-10 E	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
Total this Page	0.00	0.00	\$ 0.00				
Grand Total							

Name of person who prepared this report:

Title: president

Preparer's Signature: 77

Date Prepared: 5/6/25

al Grammarino

Phone #: 201 - 981- 4738

(Use additional pages, if necessary)

Page / of /

### **New York State Consultant Services Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contract Number: PO#7492 Contract Term: 11/15/2023 to 3/31/2025

Agency Business Unit: OAS01 Agency Department ID: 3670000

Contractor Name: American Sign Language Inc.

Contractor Address: 1412 Broadway, #2118, New York, NY 10018 Description of Services Being Provided: Interpreting Services

Scope of Contract (Choose one that b	est fits):		
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Train	ning	
☐ Data Processing ☐ Computer Pro	ogramming 🔲 🖽	Other IT consulting	
☐ Engineering ☐ Architect Services	Surveying	Environmental :	Services
☐ Health Services ☐ Mental Health	Services		
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Lega	ai	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
	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	0.00	0.00	\$ 0.00
Grand Total			

Name	<b>O</b> T	person	who	bret	pared	this	report:	Dana	Steele	

Title: Interpreter Coordinator

Phone #: (212) 477-0775

Date Prepared: 4/16/2025

Preparer's Signature:

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OA	100		
Contract Number: PO#7492		Agency Business Ur	nit: OAS01
Contract Term: 2/13/2024 to 3/31		Agency Department	
Contractor Name: Global Employme		gono, population	
Contractor Address: 45 Ashgrove La	•	2158	
Description of Services Being Provide	•		
Page of Contrast (Change one that I	hant fital.		
Scope of Contract (Choose one that I	esearch 🔲 Trair	ning	
Data Processing Computer P		Other IT consulting	
☐ Engineering ☐ Architect Service	• •	☐ Environmental	Services
☐ Health Services ☐ Mental Health	_ , ,		201 1 1 2 2 0 0 1 1 1 1 2 2 1 1 1 1 1 1
	aralegal 🔲 Lega	ai 🛛 Other Consul	tina
	Number of	Number of	Amount Payable
<b>Employment Category</b>	Employees	Hours Worked	Under the Contract
27-3091.00	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	0.00	0.00	\$ 0.00
Total triis rage	0.00	0.00	

Name of person who prepared this report: Mikeel Colocia			
Title: (%)	Phone #: 5-,8-3	78-193	フ
Preparer's Signature:			
Date Prepared: 4 W/1 2025			
(Use additional pages, if necessary)	Page	of	

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS Contract Number: PO#7493 Agency Business Unit: OAS01 Contract Term: 11/15/2023 to 3/31/2025 Agency Department ID: 3670000 Contractor Name: Geneva Worldwide, Inc. Contractor Address: 228 Park Ave. S, PMB 27669, New York, NY 10003 Description of Services Being Provided:					
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 Paralegal Legal Other Consulting					
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
Account Manager	1.00	20.00	\$500.00		
Billing Coordinator	1.00	5.00	\$250.00		
Contract Administrator	1.00	5.00	\$250.00		
	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	30.00	\$1,000.00		
Grand Total					

N	lame c	f	person v	vho	pre	pared	this	report:	Amanda	Co	leman
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Title: Director, Government Contracts & Services

Phone #: 212-255-8400

Preparer's Signature: Amanda Coleman

Date Prepared: 05/09/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS Contract Number: PO#7551					
☐ Health Services ☐ Mental Health	_ , ,		OCI VICES		
	ralegal 🔲 Leg	al 🛛 Other Consul	tina		
Number of Number of Employment Category Employees Hours Worked Under t					
President	1.00	0.00	\$0.00		
Project Managere	2.00	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		
Tabel de la D	0.00	0.00	\$0.00		
Total this Page	3.00	0.00	\$ 0.00		
Grand Total					
Name of person who prepared this re Title: President Preparer's Signature: Date Prepared: 04/18/2025	~		732-889-1490		

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8213 Agency Business Unit: OAS01
Contract Term: 1/1/2025 to 3/31/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

Scope of Contract (Choose one that best fits):							
☐ Analysis ☐ Evaluation ☐ Research ☐ Training							
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting							
☐ Engineering ☐ Architect Services	s 🔲 Surveying	g Environmental	Services				
	Services						
☐ Accounting ☐ Auditing ☐ Pa	ıralegal 🔲 Leg	gal 🔲 Other Consul	ting				
	Number of	Number of	Amount Payable				
Employment Category	Employees	Hours Worked	Under the Contract				
	0.00	0.00	\$0.00				
	0.00	0.00	\$0.00				
0.00 0.00 \$0							
	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	0.00	0.00	\$ 0.00				
Grand Total	0.00	0	\$0.00				

Name of person who prepared this report: LaShone Sweeney

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager

Preparer's Signature: <u>La Shone Sweeney</u>

Date Prepared: 5/1/2025

## New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contract Number: PO#8214 Agency Business Unit: OAS01
Contract Term: 11/01/2024 to 03/31/2025 Agency Department ID: 3670000

Contractor Name: Clover Health Services LLC

Contractor Address: 75 South Broadway, Fl. 4, White Plains, NY 10601

Description of Services Being Provided: Mental Health Services

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						
<del></del>	ralegal 🔲 Lega	al Other Consult	ting			
	Number of	Number of	Amount Payable			
Employment Category	Employees	Hours Worked	Under the Contract			
Registered Nurse	2.00	160.00	\$12,000.00			
	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	2.00	160.00	\$12,000.00			
Grand Total	2.00	160	\$12,000.00			

Name of person who prepared this report: Sudhaka	
--------------------------------------------------	--

Title: Manager

Phone #: (914) 293-5001

Ext - 404

Preparer's Signature:

Date Prepared: 04/22/2025

## New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting	State	Agency	Name:	<b>OASAS</b>
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Contract Number: PO#8216 Agency Business Unit: OAS01
Contract Term: 11/01/2024 to 03/31/2025 Agency Department ID: 3670000

Contractor Name: Clover Health Services LLC

Scope of Contract (Choose one that heat fits):

Contractor Address: 75 South Broadway, Fl. 4, White Plains, NY 10601

Description of Services Being Provided: Mental Health Services

	search    Train	-	
☐ Data Processing ☐ Computer Pro	ogramming [	Other IT consulting	
Engineering Architect Services	Surveying	Environmental	Services
☐ Health Services ☐ Mental Health	Services		
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Lega	al Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Registered Nurse	1.00	192.00	\$13,440.00
	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	1.00	192.00	\$13,440.00
Grand Total	1.00	192	\$13,440.00

Name of person who	prepared this re	port: Sudhakar B
--------------------	------------------	------------------

Title: Manager

Phone #: (914) 293-5001 Ext - 404

Preparer's Signature:

Date Prepared: 04/22/2025

## New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting	State	Agency	Name:	OASAS
COLLEGE		/ 14401101	THE INC.	

Contract Number: PO#8222 Agency Business Unit: OAS01
Contract Term: 11/01/2024 to 03/31/2025 Agency Department ID: 3670000

Contractor Name: Clover Health Services LLC

Contractor Address: 75 South Broadway, Fl. 4, White Plains, NY 10601

Description of Services Being Provided: Mental Health Services

Scope of Contract (Choose one that b		J.,	
	search	•	
Data Processing Computer Pro	-	Other IT consulting	
☐ Engineering ☐ Architect Services		☐ Environmental	Services
Health Services Mental Health		_	
☐ Accounting ☐ Auditing ☐ Pa	ralegai 🔲 Lega	al Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Registered Nurse	2.00	217.00	\$15,415.00
	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	2.00	217.00	\$15,415.00
Grand Total	2.00	217	\$15,415.00

Name	of	person	who	prepared	this	report:	Sudhakar	В

Title: Manager

Phone #: (914) 293-5001

Ext - 404

Preparer's Signature:

Date Prepared: 04/22/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8225 Agency Business Unit: OAS01
Contract Term: 01/01/2025 to 03/31/2025 Agency Department ID: 3670000

Contractor Name: EGA Associates, LLC

Contractor Address: 602 Clay Ave., Suite 200, Jeannette, PA 15644

Description of Services Being Provided: Healthcare Services

Scope of Contract (Choose one that b	est 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	ralegal 🔲 Leg	gal 🔲 Other Consul	ting				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract				
29-1141.00 Registered Nurse	2.00	307.50	25480.00				
	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	2.00	307.50	\$ 0.00				
Grand Total	2.00	307	\$25,480.00				

Name of	person who	prepared this	report: \	Vanessa	Greene
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Title: Revenue Analyst Phone #: 215-565-1034

Preparer's Signature: Vanessa L. Greene

Date Prepared: 5/6/2025

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8226 Agency Business Unit: OAS01 Contract Term: 01/01/2025 to 03/31/2025 Agency Department ID: 3670000

Contractor Name: EGA Associates, LLC

Contractor Address: 602 Clay Ave., Suite 200, Jeannette, PA 15644

Description of Services Being Provided: Healthcare Services

Scope of Contract (Choose one that b	est fits):					
☐ Analysis ☐ Evaluation ☐ Research ☐ Training						
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting						
☐ Engineering ☐ Architect Services ☐ Surveying ☐ Environmental Services						
	Services					
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting			
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
29-1141-00 Registered Nurses	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	0.00	0.00	\$ 0.00			
Grand Total	0.00	0	\$0.00			

Name of	t person	who	prepared	this	report:	Vanessa	Greene
---------	----------	-----	----------	------	---------	---------	--------

Title: Revenue Analyst Phone #: 215-565-1034 Vanessa L. Greene

Date Prepared: 5/6/2025

Preparer's Signature:

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8247 Agency Business Unit: OAS01
Contract Term: 10/20/2022 to 10/26/2027 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

Description of Services Being Provided: LPN

Scope of Contract (Choose one that be	oct fitc):				
_ ` _ ` _	·	ta ta a			
		ining			
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting					
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental :	Services		
	Services				
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting		
	Number of	Number of	Amount Payable		
<b>Employment Category</b>	Employees	<b>Hours Worked</b>	Under the Contract		
29-2061.00	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	0.00	0.00	\$ 0.00		
Grand Total	0	0	\$0.00		

Name of person who prepared the	his report: Arman Dhar	
Title: Vice President - Operations	Skung & Lac	Phone #: (315) 512-5893
Preparer's Signature:	XRUME X LAL	

Date Prepared: 04/15/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8248 Agency Business Unit: OAS01
Contract Term: 10/20/2022 to 10/26/2027 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

Description of Services Being Provided: LPN

Soons of Contract (Chance one that best fits).						
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						
☐ Accounting ☐ Auditing ☐ Paralegal ☐ Legal ☐ Other Consulting						
	Number of	Number of	Amount Payable			
Employment Category	Employees	Hours Worked	Under the Contract			
29-2061.00	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	0.00	0.00	\$ 0.00			
Grand Total	0	0	\$0.00			

	•	
Title: Vice President - Operations	$\mathcal{M} = \mathcal{M}_{\mathcal{M}}$	Phone #: (315) 512-5893
Preparer's Signature:	Skung & hal	

Date Prepared: 04/15/2025

Name of person who prepared this report: Arman Dhar

## New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS Contract Number: PO#8249 Agency Business Unit: OAS01 Contract Term: 10/20/2022 to 10/26/2027 Agency Department ID: 3670000 Contractor Name: Tryfacta Inc. Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036 Description of Services Being Provided: LPN Scope of Contract (Choose one that best fits): ☐ Evaluation Analysis Research ☐ Training ☐ Data Processing ☐ Other IT consulting ☐ Computer Programming Engineering ☐ Architect Services Surveying ☐ Environmental Services Mealth Services ☐ Mental Health Services ☐ Accounting Auditing Paralegal Legal ☐ Other Consulting **Number of** Number of **Amount Payable Employment Category Employees Hours Worked Under the Contract** 29-2061.00 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 0 **Grand Total** 0 \$0.00 Name of person who prepared this report: Arman Dhar Title: Vice President - Operations Phone #: (315) 512-5893 Skung & Lac Preparer's Signature: \_\_\_\_

(Use additional pages, if necessary)

Date Prepared: 04/15/2025

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8250 Agency Business Unit: OAS01
Contract Term: 10/20/2022 to 10/26/2027 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

Description of Services Being Provided: LPN

Scope of Contract (Choose one that be	est fits):		
☐ Analysis ☐ Evaluation ☐ Research ☐ Training			
☐ Data Processing ☐ Computer Pro		Other IT consulting	
☐ Engineering ☐ Architect Services			Services
☐ Health Services ☐ Mental Health	_ , ,	,	
☐ Accounting ☐ Auditing ☐ Pa	ıralegal 🔲 Leg	gal 🔲 Other Consult	ting
	Number of	Number of	Amount Payable
Employment Category	Employees	Hours Worked	Under the Contract
29-2061.00	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	0.00	0.00	\$ 0.00
Grand Total	0	0	\$0.00

Name of person who prepared	this report: Arman Dhar	
Title: Vice President - Operations Preparer's Signature:	1. 11.	Phone #: (315) 512-5893
Preparer's Signature:	TRUME IN hal	

### New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS Contract Number: PO#8251 Agency Business Unit: OAS01 Contract Term: 10/20/2022 to 10/26/2027 Agency Department ID: 3670000 Contractor Name: Tryfacta Inc. Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036 Description of Services Being Provided: LPN Scope of Contract (Choose one that best fits): ☐ Evaluation Analysis Research ☐ Training ☐ Data Processing ☐ Other IT consulting ☐ Computer Programming Engineering ☐ Architect Services Surveying ☐ Environmental Services ☐ Mental Health Services ☐ Accounting Auditing Paralegal Legal ☐ Other Consulting **Number of** Number of **Amount Payable Employment Category Employees Hours Worked Under the Contract** 29-2061.00 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 0 **Grand Total** \$0.00 Name of person who prepared this report: Arman Dhar 3

Title: Vice President - Operations	$\mathcal{M} = \mathcal{M}_{\mathcal{M}}$	Phone #: (315) 512-589
Preparer's Signature:	Skum Ahr	

### New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS Contract Number: PO#8252 Agency Business Unit: OAS01 Contract Term: 10/20/2022 to 10/26/2027 Agency Department ID: 3670000 Contractor Name: Tryfacta Inc. Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036 Description of Services Being Provided: LPN Scope of Contract (Choose one that best fits): ☐ Evaluation Analysis Research ☐ Training ☐ Data Processing ☐ Other IT consulting ☐ Computer Programming Engineering ☐ Architect Services ☐ Surveying ☐ Environmental Services Mealth Services ☐ Mental Health Services ☐ Accounting Auditing Paralegal Legal ☐ Other Consulting **Number of** Number of **Amount Payable Employment Category Employees Hours Worked Under the Contract** 29-2061.00 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 0 \$0.00 **Grand Total** 0

Name of person who prepared th	is report: Arman Dhar	
Title: Vice President - Operations	Skung & Lac	Phone #: (315) 512-5893
Preparer's Signature:	XRUMET KAL	

## New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8253

Agency Business Unit: OAS01

Contract Term: 10/20/2022 to 10/26/2027 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

Description of Services Being Provided: LPN

Scope of Contract (Chance one that h	oct fitc):		
Scope of Contract (Choose one that best fits):			
		ining	
☐ Data Processing ☐ Computer Pro	ogramming L	Other IT consulting	
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services
	Services		
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting
	Number of	Number of	Amount Payable
Employment Category	Employees	Hours Worked	Under the Contract
29-2061.00	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	0.00	0.00	\$ 0.00
Grand Total	0	0	\$0.00

Title: Vice President - Operations	1 /1	Phone #: (315) 512-5893
Preparer's Signature:	Skung & had	

Date Prepared: 04/15/2025

Name of person who prepared this report: Arman Dhar

## New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8254

Contract Term: 10/20/2022 to 10/26/2027

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

Description of Services Being Provided: LPN

Scope of Contract (Choose one that be	est fits):		
☐ Analysis ☐ Evaluation ☐ Research ☐ Training			
☐ Data Processing ☐ Computer Pro		Other IT consulting	
☐ Engineering ☐ Architect Services			Services
☐ Health Services ☐ Mental Health	_ , ,	,	
	ıralegal 🔲 Leg	gal 🗌 Other Consult	ting
	Number of	Number of	Amount Payable
Employment Category	Employees	Hours Worked	Under the Contract
29-2061.00	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	0.00	0.00	\$ 0.00
Grand Total	0	0	\$0.00

Name of person who prepared the	nis report: Arman Dhar	
Title: Vice President - Operations	1 11	Phone #: (315) 512-5893
Preparer's Signature:	Skum Mhal	

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS Contract Number: PO#8255 Agency Business Unit: OAS01 Contract Term: 10/20/2022 to 10/26/2027 Agency Department ID: 3670000 Contractor Name: Tryfacta Inc. Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036 Description of Services Being Provided: LPN Scope of Contract (Choose one that best fits): Analysis Evaluation Research ☐ Training ☐ Data Processing ☐ Other IT consulting ☐ Computer Programming Engineering ☐ Architect Services Surveying ☐ Environmental Services Mealth Services ☐ Mental Health Services ☐ Accounting Auditing Paralegal Legal ☐ Other Consulting **Number of** Number of **Amount Payable Employment Category Employees Hours Worked Under the Contract** 29-2061.00 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 0 **Grand Total** \$0.00 Name of person who prepared this report: Arman Dhar

· · ·	•	
Title: Vice President - Operations	$\mathcal{M} = \mathcal{M}_{\mathcal{M}}$	Phone #: (315) 512-5893
Preparer's Signature:	Sound Alac	

Preparer's Signature:

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS	
Contract Number: PO#8256	Agency Business Unit: OAS01
Contract Term: 10/20/2022 to 10/26/2027	Agency Department ID: 3670000
Contractor Name: Tryfacta Inc.	

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

Description of Services Being Provided: LPN

Soons of Contract (Chance one that h			
Scope of Contract (Choose one that best fits):			
☐ Analysis ☐ Evaluation ☐ Res	search 📙 Tra	ining	
☐ Data Processing ☐ Computer Pro	ogramming [	Other IT consulting	
☐ Engineering ☐ Architect Services	Surveying	Environmental	Services
	Services		
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🗌 Leg	gal 🔲 Other Consul	ting
	Number of	Number of	Amount Payable
<b>Employment Category</b>	<b>Employees</b>	Hours Worked	Under the Contract
29-2061.00	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	0.00	0.00	\$ 0.00
Grand Total	0	0	\$0.00

Name of person who prepared thi	s report: Arman Dhar	
Title: Vice President - Operations	Sound & Low	Phone #: (315) 512-5893
Preparer's Signature:	TRUME IN hal	

## New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8257 Agency Business Unit: OAS01
Contract Term: 10/20/2022 to 10/26/2027 Agency Department ID: 3670000

Contractor Name: Tryfacta Inc.

Contractor Address: 150 Broadway, 12th Floor, New York, NY 10036

Description of Services Being Provided: LPN

Scope of Contract (Choose one that best fits):  Analysis					
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
29-2061.00	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	0.00	0.00	\$ 0.00		
Grand Total	0	0	\$0.00		

Name of person who prepared this	s report: Arman Dhar	
Title: Vice President - Operations	1 /1	Phone #: (315) 512-5893
Preparer's Signature:	Skum A hal	

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8259 Agency Business Unit: OAS01 Contract Term: 1/1/2025 to 3/31/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

Scope of Contract (Choose one that be	est fits):		
☐ Analysis ☐ Evaluation ☐ Res	search 🔲 Tra	ining	
☐ Data Processing ☐ Computer Pro	ogramming 🗌	Other IT consulting	
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services
	Services		
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
RN	1.00	163.00	\$31,377.50
	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
Total this Page	1.00	163.00	\$31,377.50
Grand Total	1.00	163	\$31,377.50

Name of person who prepared this report: LaShone Sweeney

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager LaShone Sweeney

## New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8260 Agency Business Unit: OAS01
Contract Term: 1/1/2025 to 3/31/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

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						
Number of Number of Amount Payable						
Employment Category	Employees	Hours Worked	Under the Contract			
	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	0.00	0.00	\$ 0.00			
Grand Total	0.00	0	\$0.00			

Name of person who prepared this report: LaShone Sweeney

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager

Preparer's Signature: LaShone Sweeney

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8261 Agency Business Unit: OAS01 Contract Term: 1/1/2025 to 3/31/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

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 ☐ Paralegal ☐ Legal ☐ Other Consulting							
	Number of	Number of	Amount Payable				
Employment Category	Employees	Hours Worked	Under the Contract				
	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	0.00	0.00	\$ 0.00				
Grand Total	0.00	0	\$0.00				

Name of person who prepared this report: LaShone Sweeney

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager LaShone Sweeney

Preparer's Signature:

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8262 Agency Business Unit: OAS01 Contract Term: 1/1/2025 to 3/31/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

Scope of Contract (Choose one that be	est fits):						
☐ Analysis ☐ Evaluation ☐ Research ☐ Training							
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting							
☐ Engineering ☐ Architect Services ☐ Surveying ☐ Environmental Services							
	Services						
☐ Accounting ☐ Auditing ☐ Paralegal ☐ Legal ☐ Other Consulting							
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract				
	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	0.00	0.00	\$ 0.00				
Grand Total	0.00	0	\$0.00				

Name of person who prepared this report: LaShone Swe	LaShone Sweeney	his report:	prepared	person who	Name of
------------------------------------------------------	-----------------	-------------	----------	------------	---------

Phone #: (718) 643-4880 ext. 108

Title: Human Resources Manager

LaShone Sweeney Preparer's Signature:

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8263 Agency Business Unit: OAS01
Contract Term: 1/1/2025 to 3/31/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

Scope of Contract (Choose one that be	est fits):					
☐ Analysis ☐ Evaluation ☐ Research ☐ Training						
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting						
☐ Engineering ☐ Architect Services ☐ Surveying ☐ Environmental Services						
	Services					
☐ Accounting ☐ Auditing ☐ Paralegal ☐ Legal ☐ Other Consulting						
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
RN	1.00	75.25	\$5,794.25			
	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	1.00	75.25	\$5,794.25			
Grand Total	1.00	75	\$5,794.25			

Name of person who prepared this report: LaShone Swe	LaShone Sweeney	his report:	prepared	person who	Name of
------------------------------------------------------	-----------------	-------------	----------	------------	---------

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager

Preparer's Signature: <u>La Shone Sweeney</u>

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8264 Agency Business Unit: OAS01 Contract Term: 1/1/2025 to 3/31/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

Scope of Contract (Choose one that be	est 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 ☐ Paralegal ☐ Legal ☐ Other Consulting							
Number of Number of Amount Payable Employment Category Employees Hours Worked Under the Contract							
RN	10.00	493.50	\$54,342.75				
	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				
Total this Page	10.00	493.50	\$54,342.75				
Grand Total	10.00	493	\$54,342.75				

Name of person who prepared this report: LaShone S	Sweenev
----------------------------------------------------	---------

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager

La Shone Sweeney

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8265 Agency Business Unit: OAS01
Contract Term: 1/1/2025 to 3/31/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

Scope of Contract (Choose one that be	est fits):					
☐ Analysis ☐ Evaluation ☐ Research ☐ Training						
☐ Data Processing ☐ Computer Pro	ogramming [	Other IT consulting				
☐ Engineering ☐ Architect Services	s ☐ Surveying	g ☐ Environmental	Services			
	Services					
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting			
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
	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	0.00	0.00	\$ 0.00			
Grand Total	0.00	0	\$0.00			

Name of person who prepared this report: LaShone S	Sweenev
----------------------------------------------------	---------

Title: Human Resources Manager

Preparer's Signature: <u>La Shone Sweeney</u>

Date Prepared: 5/1/2025

(Use additional pages, if necessary)

Phone #: (718) 643-4880 ext.

108

### New York State Consultant Services **Contractor's Annual Employment Report**

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8266 Agency Business Unit: OAS01 Contract Term: 1/1/2025 to 3/31/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

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							
	Services						
☐ Accounting ☐ Auditing ☐ Pa	ıralegal 🔲 Leg	gal 🔲 Other Consul	ting				
	Number of Number of Amount Payable						
Employment Category	Employees	Hours Worked	Under the Contract				
	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	0.00	0.00	\$ 0.00				
Grand Total	0.00	0	\$0.00				

Name of person who prepared this rep
--------------------------------------

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager LaShone Sweeney

Preparer's Signature:

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8267 Agency Business Unit: OAS01
Contract Term: 01/01/2025 to 03/31/2025 Agency Department ID: 3670000

Contractor Name: Ethan Allen Personnel Group, Inc. d/b/a Ethan Allen Staffing

Contractor Address: 59 Academy Street, Poughkeepsie, NY 12603

Description of Services Being Provided:

Scope of Contract (Choose one that best fits):  Analysis					
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
	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	0.00	0.00	\$ 0.00		
Grand Total	0.00	0	0		

Name of person who prepared this report: David App	el
----------------------------------------------------	----

Title: Payroll Administrator Phone #: 845-471-9667

Preparer's Signature: David Appel

Date Prepared: 05/22/25

### New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting	State	Adency	Name:	CASAS
CUITHAGERIU	DIGIO	AUDITOR	Naille.	UNDAU

Contract Number: PO#8268

Agency Business Unit: OAS01

Contract Term: 11/01/2024 to 03/31/2025

Agency Department ID: 3670000

Contractor Name: Clover Health Services LLC

Contractor Address: 75 South Broadway, Fl. 4, White Plains, NY 10601

Description of Services Being Provided: Mental Health Services

Scope of Contract (Choose one that			
_ ,	Research 🔲 Trair		
☐ Data Processing ☐ Computer	•	Other IT consulting	
Engineering Architect Service	es 🔲 Surveying	■ Environmental	Services
Health Services Mental Hea	Ith Services		
Accounting Auditing	Paralegal 🔲 Lega	al Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Registered Nurse	3.00	232.00	\$16,320.00
	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	232,00	\$16,320.00
Grand Total	3.00	232	\$16,320.00

Name of	person	who	prepared	this	report:	Sudhakar	B

Title: Manager

Phone #: (914) 293-5001

Ext - 404

Preparer's Signature:

Date Prepared: 04/23/2025

(Use additional pages, if necessary)

Report Period: April 1, 2024 to March 31, 2025

Contracting	State	Agency	Name:	CASAS
Ovi ili acili iu	OLDIO	VACIOA	1101110.	UNUNU

Contract Number: PO# 8269

Agency Business Unit: OAS01

Contract Term: 01/01/2025 to 03/31/2025

Agency Department ID: 3670000

Contractor Name: Clover Health Services LLC

Contractor Address: 75 South Broadway, Fl. 4, White Plains, NY 10601

Description of Services Being Provided: Nursing

Scope of Contract (Choose one that best fits):

	search 🔲 Trair	•	
Data Processing Computer Pro	ogramming 🔲	Other IT consulting	
Engineering Architect Services	Surveying	☐ Environmental :	Services
☐ Health Services ☑ Mental Health	Services		
Accounting Auditing Pa	ralegal 🔲 Lega	al Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Licensed Practical Nurse	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	0.00	0.00	\$ 0.00
Grand Total	0.00	0	\$0.00

N	lame (	ΣŤ	person \	who	prepared	I th	is repor	Ŧ.	Sudhal	CAT	В
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Title: Manager

Phone #: (914) 293-5001

Ext - 404

Preparer's Signature:

Date Prepared: 04/22/2025

(Use additional pages, if necessary)

Page 1 of 1

### New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting	Ctata	Agenov	Name:	DASAS
Contracting	Sidle	AUBITOV	INBITIE.	UASAS

Contract Number: PO#8270 Agency Business Unit: OAS01
Contract Term: 11/01/2024 to 03/31/2025 Agency Department ID: 3670000

Contractor Name: Clover Health Services LLC

Contractor Address: 75 South Broadway, Fl. 4, White Plains, NY 10601

Description of Services Being Provided: Mental Health Services

Scope of Contract (Choose one that is		da a	
	search 🔲 Trair	-	
Data Processing Computer Pr	•	Other IT consulting  Environmental 5	Populoso
☐ Engineering ☐ Architect Services			Services
☐ Health Services ☐ Mental Health☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Lega	al Other Consult	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Registered Nurse	3.00	626,33	\$44,193.10
	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	626.33	\$44,193.10
Grand Total	3.00	626	\$44,193.10

Name	of	person	who	prepared	i thi:	s report:	Sudha	kar	В
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Phone #: (914) 293-5001

Ext - 404

Preparer's Signature:

Title: Manager

Date Prepared: 04/22/2025

(Use additional pages, if necessary)

### New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting	State	Agency	Name:	OASAS
OUTH GOING		7 1401101	I TELLIO	Ununu

Contract Number: PO# 8271 Agency Business Unit: OAS01
Contract Term: 01/01/2025 to 03/31/2025 Agency Department ID: 3670000

Contractor Name: Clover Health Services LLC

Contractor Address: 75 South Broadway, Fl. 4, White Plains, NY 10601

Description of Services Being Provided: Nursing

Scope of Contract (Choose one that I Analysis	esearch	ning Other IT consulting  Environmental	Services
Health Services Mental Healt		. <b>–</b>	_
☐ Accounting ☐ Auditing ☐ P	aralegal 🔲 Lega	al Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Licensed Practical Nurse	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	0.00	0,00	\$ 0.00
Grand Total	0.00	0	\$0.00

Name o	of nerson	who prer	nared this	report:	Sudha	kar
Namer	II DELKON	wrib brer	iaren inis	recon:	Sugna	Kar

Title: Manager

Phone #: (914) 293-5001 Ext - 404

Preparer's Signature:

Date Prepared: 04/22/2025

Date Flepaied. 0-1/22/2020

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8280 Agency Business Unit: OAS01
Contract Term: 1/1/2025 to 3/31/2025 Agency Department ID: 3670000

Contractor Name: Penda Aiken, Inc.

Contractor Address: 330 Livingston Street, 2<sup>nd</sup> Floor, Brooklyn, NY 11217

Description of Services Being Provided: Nursing Staff

Scope of Contract (Choose one that be	est fits):		
☐ Analysis ☐ Evaluation ☐ Res	search 🔲 Tra	ining	
☐ Data Processing ☐ Computer Pro	ogramming	Other IT consulting	
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services
	Services		
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal 🔲 Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
RN	3.00	989.00	\$158,648.88
	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	989.00	\$158,648.88
Grand Total	3.00	989	\$158,648.88

Name of person who prepared this re	3DOLL:	LaShone	Sweenev
-------------------------------------	--------	---------	---------

Phone #: (718) 643-4880 ext.

108

Title: Human Resources Manager

Preparer's Signature: Lashone Sweeney

## New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: PO#8297 Agency Business Unit: OAS01
Contract Term: 01/01/2025 to 03/31/2025 Agency Department ID: 3670000

Contractor Name: EGA Associates, LLC

Contractor Address: 602 Clay Ave., Suite 200, Jeannette, PA 15644

Description of Services Being Provided: Healthcare Services

☐ Data Processing ☐ Computer Pro☐ Engineering ☐ Architect Services ☐ Health Services ☐ Mental Health	search	_	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1141-00 Registered Nurses	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	0.00	0.00	\$ 0.00
Grand Total	0.00	0	\$0.00

Name o	t person	who	prepared	this	report:	Vanessa Greer	ıe
--------	----------	-----	----------	------	---------	---------------	----

Title: Revenue Analyst

Vanessa L. Greene

Phone #: 215-565-1034

Preparer's Signature:

## New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contract Number: T001295

Agency Business Unit: OAS01

Contract Term: 01/01/2022 to 12/31/2024

Agency Department ID: 3670000

Contractor Name: Brown & Peisch, PLLC

Contractor Address: 1233 20th St. NW, Washington, DC 20036

Description of Services Being Provided: Legal Services

Scope of Contract (Choose one that b	est fits):		
☐ Analysis ☐ Evaluation ☐ Re	search 🔲 Tra	ining	
☐ Data Processing ☐ Computer Pro	ogramming [	Other IT consulting	
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services
☐ Health Services ☐ Mental Health	Services		
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🛭 Leg	gal	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Lawyers	7.00	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	7.00	0.00	\$ 0.00
Grand Total	7.00	0	\$ 0.00

Name of person who prepared this report: Grace Wright

Title: Office Manager

Phone #: 202-499-4258

Preparer's Signature: Date Prepared: 5/21/2025

(Use additional pages, if necessary)

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Agency Business Uragency Department A 92110 Management Syste  Other IT consulting  Environmental Simple Consulting  Other Consulting  Number of Hours Worked  938.00	ID: 3670000
Other IT consulting  Environmental S  Other Consult  Number of Hours Worked  938.00	ting  Amount Payable  Under the Contract
Hours Worked 938.00	Under the Contract
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
938.00	\$82,500.00
938	\$82,500.00
1	\$82,500.00 619-231-7555 x129
1	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 938.00

(Use additional pages, if necessary)

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS Contract Number: T001300 Agency Business Unit: OAS01 Contract Term: 04/01/2023 to 09/30/2025 Agency Department ID: 3670000 Contractor Name: Rescue Agency Contractor Address: 2437 Morena Blvd., San Diego, CA 92110 Description of Services Being Provided: Credentialing Management System  Scope of Contract (Choose one that best fits):  Analysis Evaluation Research Training					
☐ Data Processing ☐ Computer Pro		Other IT consulting			
☐ Engineering ☐ Architect Services	• •	」	Services		
Health Services		! M OH O	<b>1</b>		
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🗌 Leg				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
All deliverables fulfilled prior to this	0.00	0.00	\$0.00		
report period	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	0.00	0.00	\$ 0.00		
Grand Total	0.00	0	\$0.00		
Name of person who prepared this retrible: Sr. Account Manager  Preparer's Signature: Sarah  Date Prepared: 5/1/2025	_		(916) 670-5497		

### **New York State Consultant Services** Contractor's Annual Employment Report Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name:	OASAS		
Contract Number: T001320		Agency Business Ur	nit: OAS01
Contract Term: 3/01/2024 to 2/2		Agency Department	
Contractor Name: Gemini Research			
Contractor Address: 220 Grove Stro	eet, Northampton, I	MA 01060	
Description of Services Being Provi	ided: Gap Analysis	3	
Scope of Contract (Choose one that	heat film):		
_ ' _ '	Research	nina	
☐ Data Processing ☐ Computer F		Other IT consulting	
☐ Engineering ☐ Architect Service		☐ Environmental	Services
☐ Health Services ☐ Mental Heal	th Services		
☐ Accounting ☐ Auditing ☐ F	Paralegal 🔲 Lega	al Other Consult	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
19-3401.00	1.00	0.00	\$40,500.00
10-0-0-0	1.00	0.00	\$ <del>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</del>
3-5-40 1.00	0.00	0.00	
3-3-40 1.00			\$0.00
3-5-10 1.00	0.00	0.00	\$0.00 \$0.00
18-0-40 1.00	0.00	0.00 0.00	\$0.00 \$0.00 \$0.00
3-0-10 1.00	0.00 0.00 0.00	0.00 0.00 0.00	\$0.00 \$0.00 \$0.00
10-0-10 1.00	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00
10-0-10 1.00	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 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 0.0	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 0.0	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
Total this Page	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 0.0	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

(Use additional pages, if necessary)

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contract Number: T001321

Agency Business Unit: OAS01

Contract Term: 6/01/2024 to 9/30/2024

Agency Department ID: 3670000

Contractor Name: Debra Rhoades dba Rhoades to Recovery

Contractor Address: 8459 SW 92nd Street, Unit E, Ocala, FL 34481

Description of Services Being Provided: Training

☐ Data Processing ☐ Computer P☐ Engineering ☐ Architect Services ☐ Mental Healt	esearch 🛚 Train rogramming 🔲 es 🔲 Surveying	Other IT consulting  Environmental	
Employment:Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
13-1151.00	0.02	80.00	\$48,000.00
	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>'\$0.00</b>
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	0.02	80.00	\$48,000.00
Grand Total	0.02	80	48000.00

Name of person who	prepared th	iis report: Debra	Rhoades
--------------------	-------------	-------------------	---------

Title: Owner, Rhoades to Recovery Training and Consulting

Phone #: 518-527-2693

Preparer's Signature: Deme Bloods

Report Period: April 1, 2024 to March 31, 2025

	Contracting	State Agency	v Name:	OASAS
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Contract Number: 04-12446 Agency Business Unit: OAS01
Contract Term: 12/21/2022 to 6/20/2025 Agency Department ID: 3670000

Contractor Name: Knowledge Builders Inc.

Contractor Address: 1977 Western Avenue, Suite 1, Albany, NY 12203

Description of Services Being Provided: Software Architect

Scope of Contract (Choose one that best fits):					
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
OCHBIT12446	1.00	1,990.00	\$163,995.90		
	0.00	0.00	\$0.00		
0.00 0.00 \$0.00					
0.00 0.00 \$0.0					
0.00 0.00 \$0.0					
0.00 0.00 \$0.00					
	0.00 0.00 \$0.0				
	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	Total this Page 1.00 1,990.00 \$163,995.9				
Grand Total	1.00	1,990	\$163,995.90		

Name of person who prepared t	his report: Sanjay Kapalli	
Title: Executive Vice President	KJamin	Phone #: (518) 250-4189
Preparer's Signature:	(27), 1	
Date Prepared: 04/30/2025		

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name: OASAS

Contract Number: 05-13184 Agency Business Unit: OAS01
Contract Term: 2/20/2024 to 8/19/2026 Agency Department ID: 3670000

Contractor Name: Knowledge Builders Inc.

Contractor Address: 1977 Western Avenue, Suite 1, Albany, NY 12203

Description of Services Being Provided: Software Architect

Scope of Contract (Choose one that best fits):					
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
OCHBIT13184	1.00	1,869.00	\$172,303.11		
	0.00	0.00	\$0.00		
0.00 0.00 \$0.00					
0.00 0.00 \$0.0					
0.00 0.00 \$0.00					
0.00 0.00 \$0.00					
	0.00 0.00 \$0.0				
	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	Total this Page 1.00 1,869.00 \$172,303.1				
Grand Total	1.00	1,869	\$172,303.11		

Name of person who prepared th	nis report: Sanjay Kapalli	
Title: Executive Vice President	Klamm	Phone #: (518) 250-4189
Preparer's Signature:	(T) March	
Date Prepared: 04/30/2025		

Report Period: April 1, 2024 to March 31, 2025

Contracting	State Agency	/ Name:	OASAS
Contracting	Olalo / Naci lo	, italiic.	

Contract Number: 05-13448 Agency Business Unit: OAS01
Contract Term: 8/30/2024 to 3/1/2027 Agency Department ID: 3670000

Contractor Name: Knowledge Builders Inc.

Contractor Address: 1977 Western Avenue, Suite 1, Albany, NY 12203

Description of Services Being Provided: Business Analyst

Scope of Contract (Choose one that best fits):					
□ Data Processing    □ Computer Processing     □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing     □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing    □ Computer Processing     □ Computer Processing    □ Computer Processing    □ Computer Pr	ogramming 🗌	Other IT consulting			
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services		
☐ Health Services ☐ Mental Health	Services				
☐ Accounting ☐ Auditing ☐ Pa	ralegal 🔲 Leg	gal	ting		
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
OCHBIT13448	1.00	926.00	\$68,672.16		
	0.00	0.00	\$0.00		
0.00 0.00 \$0.00					
0.00 0.00 \$0.0					
0.00 0.00 \$0.0					
0.00 0.00 \$0.0					
0.00 0.00 \$0.0					
	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	Total this Page 1.00 926.00 \$68,672.10				
Grand Total	1.00	926	\$68,672.16		

Name of person who prepared th	is report: Sanjay Kapalli	
Title: Executive Vice President	KJamin	Phone #: (518) 250-4189
Preparer's Signature:	(T) Mas ( )	
Date Prepared: 04/30/2025		

(Use additional pages, if necessary)

### FORM B

# New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2024 to March 31, 2025

Contracting State Agency Name:  Contract Number: N/A  Contract Term: 4/1/2024 to 3/31/2025  Contractor Name: MoxieIT Solutions Inc.  Contractor Address: 44025 Pipeline Plaza, Suite 110, Ashburn, VA 20147  Description of Services Being Provided: N/A					
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 ☐ Paralegal ☐ Legal ☐ Other Consulting					
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
	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	0.00	0.00	\$ 0.00		
Grand Total			0		
Name of person who prepared this re Title: President Preparer's Signature: Date Prepared: 5/8/2025	eport: Krishna Lar		703-763-0777		

Page

of