

**FORM A**

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

State Agency Name: SUNY Upstate Medical  
 State Agency Department ID: \_\_\_\_\_ Agency Business Unit: 28110  
 Contractor Name: Fisher Associates Contract Number: D550409  
 Contract Start Date: / / Contract End Date: / /

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Landscape Arch. Group Manager	1.00	46.00	\$8,906.98
Sr. Project Manager	1.00	211.00	\$39026.56
Landscape Architect II	1.00	324.00	\$39,327.12
Designer II	1.00	230.00	\$21,429.93
Sr. Civil Engineer	1.00	8.00	\$1,716.66
Engineer II	1.00	91.00	\$14,201.46
Engineer	1.00	89.00	\$9,130.96
Visual Simulation Specialist II	1.00	104.00	\$9,690.05
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	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	8.00	1,103.00	\$143,429.72
<b>Grand Total</b>			

Name of person who prepared this report: John Reddington

Title: LA Group Manager

Phone #: 585.334.1310

Preparer's Signature: \_\_\_\_\_  \_\_\_\_\_

Date Prepared: 07/01/2025



**FORM A**

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

State Agency Name: SUNY Upstate Medical	Agency Business Unit: 28110
State Agency Department ID:	Contract Number: D550409
Contractor Name: FS Engineering, DPC	Contract End Date: / /
Contract Start Date: / /	

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
11-9041 A&E Manager	1.00	3.00	\$546.10
17-2141 Mechanical Engineer	1.00	81.00	\$13,958.91
17-2071 Electrical Engineer	1.00	26.00	\$4,515.33
17-2071 Electrical Engineer	1.00	149.00	\$17,397.24
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
<b>Total this Page</b>	<b>4.00</b>	<b>259.00</b>	<b>\$36,417.58</b>
<b>Grand Total</b>	<b>4.00</b>	<b>259.00</b>	<b>\$36,417.58</b>

Name of person who prepared this report: Elizabeth Fisher

Title: Principal

Phone #: 315-471-4013

Preparer's Signature:  \_\_\_\_\_

Date Prepared: 09/09/2025

**FORM A**

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

State Agency Name: SUNY Upstate Medical  
 State Agency Department ID: \_\_\_\_\_ Agency Business Unit: 28110  
 Contractor Name: Insight-Ops Contract Number: D550409  
 Contract Start Date: / / Contract End Date: / /

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Principal	1.00	6.00	\$420.00
Sr Associate	1.00	65.00	\$4,550.00
Associate	1.00	49.33	\$2,976.08
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	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	120.33	\$7,946.08
<b>Grand Total</b>			\$20,500.88

Name of person who prepared this report: D MacDonald

Title: Principal

Phone #: 585-747-3334

Preparer's Signature: 

Date Prepared: 9/10/2025

**FORM A**

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

State Agency Name: SUNY Upstate Medical  
 State Agency Department ID: \_\_\_\_\_ Agency Business Unit: 28110  
 Contractor Name: Ravi Engineering Contract Number: D550409  
 Contract Start Date: / / Contract End Date: / /

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Project Manager V	1.00	2.00	\$413.05
Senior Drafter / CAD	1.00	26.00	\$2,953.31
Party Chief (Office / Travel)	1.00	6.00	\$876.26
I-Man (Office / Travel)	1.00	6.00	\$486.81
Party Chief (Field)	1.00	16.00	\$2,336.69
I-Man (Field)	1.00	16.00	\$1,298.16
	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
	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	72.00	\$8,364.28
<b>Grand Total</b>			

Name of person who prepared this report: Sean J. Baldwin

Title: Survey Dept. Manager

Phone #: 585-697-2061

Preparer's Signature:  \_\_\_\_\_

Date Prepared: 9/10/2025

