Employee Relations

Contractor's	New York State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2015 to March 31, 2016				
Contracting State Agency Name: Governor's Office of Employee Relations Contract Number: C12034 Agency Business Unit: OER01 Contract Term: 7/1/2015 to 6/30/2016 Agency Department ID: 1120000 Contractor Name: Salvatore J. Iacone, Ph.D. Contractor Address: 30 Engle Street, Apt. 4-1, Tenaf{y, NJ 07670 Description of Services Being Provided: Jobs Skills Training Curriculum Development					
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 Other Consulting					
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
Fraining & Development Specialist	1	273	\$49,481.25		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
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		
Total this Page	1.00	273.00	\$49,481.25		
Grand Total	1	273	\$49,481.25		

Name of person who prepared this report: Salvatore J. Iacone

Title: Contractor

Preparer's Signature:

Date Prepared: 5/1/2016

Phone #: 201-871-4554



OSC Use Only: Reporting Code: Category Code:

FORM B NYS GOER Award 66816

State Consultant Services - Contractor's Annual Employment Report Report Period: April 1, 2015 to March 31, 2016

State Agency Name: Governor's Office of Employee Relation	Agency Name: Governor's Office of Employee Relations		Agency Code: 1120000		
The Research Foundation for SUNY on behalf of the		Contract Number: C14037			
Contract Start Date: 1/1/2014		Contract End Date:	12/31/2017	7	
Description of Services Being Provided: Job Skills and Profess Scope of Contract (Choose one that best fits): Analysis Evaluation Research Training X Data Processing Computer Programming Other IT Consul Engineering Architect Services Surveying Environmenta Health Services Mental Health Services Accounting Auditing Paralegal Legal Other Consultin	ting al Services	-4 10	¥.	12	
	Number of	Number of hours worked	Amount Paya		
Employment Category Administrative Services Managers 11-3011.00	Employees 12	8,372.6	\$ 516,59		
Computer Suppt. Specialist 15-1041.00	12	149.3		90.42	
Computer Programmers 15-1021.00	3	425.5	\$ 27,48		
Education AdministrPostsec 11-9033.00	1	315.3	\$ 55,30		
Exec. Secretaries & Admin. Assistants 43-6011.00	3	4,458.7	\$ 148,63		
Graphic Designer 27-1024.00	0	0.0	\$	-	
Network & Computer Sys Adm 15-1071.00	0	0.0	\$	-	
Office & Administrative Support, all other 43-9199.99	0	0.0	\$	-	
Vocational Educ. Teacher - Postsec, 25-1194.00	4	4,455.6	\$ 291,24	18.68	
Graduate Teaching Assistant 25-1191.00	1	1,004.9	\$ 38,25	_	
Social Scientists & Related Workers, All Other 19-3099.99	3	1,130.4	\$ 77,16	8.89	
Training and Development Managers 11-3042.00	2	1,332.7	\$ 80,27	9.10	
Social Science Research Assistant 19-4061.00	1	114.9	\$ 9,33	33.13	
	0	0.0	\$	-	
	0	0.0	\$	87	
	0	0.0	\$	-	
4	0	0.0	\$	-	
Total this page	31	21,759.8	\$ 1,251	,694	
Grand Total	31	21,759.8	\$ 1,251,69		

Name of person who prepared this report: Julie Aversa

Title: Project Staff Associate

Phone No: 518-442-6566

NUNDA Preparer's Signature: Date Prepared: 5/5/2016

Submit Form B to each of the following locations: NYS Office of the State Comptroller, Bureau of Contracts, 110 State Street, 11th Floor, Albany, NY 12236; Attn: Consultant Reporting, Fax (518) 474-8030 or (518)-473-8808; NYS Department of Civil Service, Alfred E. Smith Office Building, Albany, NY 12239; NYS Governor's Office of Employee Relations, Division for Administration, 2 Empire State Plaza, 8th Floor, Albany, NY 12223-1250, Fax (518) 473-6725.

Chapter 10 defines Consulting Services to include any contracts entered into by the University for analysis, evaluation, research, training, data processing, computer programming, engineering, environmental, health, and mental health services, accounting, auditing, paralegal, legal or similar services.

(Note: Access the O*NET database, which is available through the US Department of Labor's Employment and Training Administration, on-line at online.onetcenter.org to find a list of occupations.)

OSC Use Only: Reporting Code: Category Code:

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: NYS DOLDER - Agency Co	ode:
Contract Number: PH65773 Labor Management	OEROI
Contract Term: 10/01/2012 to 09/30/2017	1120000
Contractor Name: IIT Inc	
Contractor Address: 6 CORNISH COURT, SUITE 101, HUNTINGTON	STATION, NY 11746
Description of Services Being Provided: IT Services	en, e has en arran delanar de las pers

Engineering Architect Services Health Services Mental Health S	arch	r IT consulting	es 🗌
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
15-1131.00 Computer Programmers	4	4810	\$ 335306.41
Total this page	4	4810	\$ 335306.41
Grand Total	4	4810	\$ 335306.41
Name of person who prepared this Preparer's Signature: Title: Managing Director Date Prepared: 5/5/2016		ati one #: 631-254-8600 2	erh Jeti 205

Use additional pages if necessary)

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: Governor's Office of Employee Relations				
Contract Number: S12035		Agency Business Ur	nit: OER01	
Contract Term: 4/1/2013 to 12/31/2016		Agency Department	ID: 1120000	
Contractor Name: Jeffrey M. Selchick, Esq.				
Contractor Address: PO Box 11280,	Albany, NY 1221	1		
Description of Services Being Provide	ed: Master Arbit	rator for CSEA Contr	act Grievance	
Process				
Scope of Contract (Choose one that b	2-2	er tit stere a		
		ning		
Data Processing Computer Pro		Other IT consulting		
Engineering Architect Services	,	Environmental	Services	
Health Services Mental Health			178	
Accounting Auditing Pa	ralegal 🛛 Leg	al Other Consul	ting	
	Number of	Number of	Amount Payable	
Employment Category	Employees	Hours Worked	Under the Contract	
Master Arbitrator	1.00	1,000.00	\$64,800.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	TTAL AND			
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00 \$0.00	
	The second s			
	0.00	0.00	\$0.00	
	0.00 0.00	0.00 0.00	\$0.00 \$0.00	
	0.00 0.00 0.00	0.00 0.00 0.00	\$0.00 \$0.00 \$0.00	
	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00	
	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
	0.00 0.00 0.00 0.00 0.00 0.00	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 \$0.00 \$0.00 \$0.00	

Name of person who prepared this report: Jeffrey M. Selchick, Esq.

Selet Title: Master Arbitrator Phone #: 518-783-0016 Preparer's Signature: m Date Prepared: 05/05/2016

(Use additional pages, if necessary)

Contractor's	Annual Em	ultant Services ployment Rep to March 31, 201				
Contracting State Agency Name: Governor's Office of Employee Relations Contract Number: S14038 Agency Business Unit: OER01 Contract Term: 01/01/2014 to 12/31/2015 Agency Department ID: 1120000 Contractor Name: James E. Martin, Jr. Contractor Address: 2201 Brooke Circle, Watervliet, New York 12189 Description of Services Being Provided: Arbitrator						
Scope of Contract (Choose one that best fits): Analysis Evaluation Data Processing Computer Programming Other IT consulting Engineering Architect Services Health Services Mental Health Services Accounting Paralegal						
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
Arbitrators, Mediators, and Conciliators	1.00	768.00	\$64,458.28			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	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 this Page 1.00 768.00 \$64,458.28						

Name of person who prepared this report: James E. Martin, Jr.

8 An

Title: Permanent Umpire

Preparer's Signature:

Date Prepared: 05/10/2016

Phone #: 518-339-6612

New York State Consultant Services Contractor's Annual Employment Report Period: April 1, 2015 to March 21, 2016

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: Go	overnor's Office of	of Employee Relation	S	
Contract Number: S15003 Agency Business Unit: OER01				
Contract Term: 1/1/2016 to 12/31/2	2016	Agency Department	ID: 1120000	
Contractor Name: Jeffrey M. Selchick, Esq.				
Contractor Address: PO Box 11280,	Albany, NY 122	11		
Description of Services Being Provide	ed: Regional Ar	bitrator for CSEA Exp	edited Process	
12 200				
Scope of Contract (Choose one that b	0.000 - 0.000 - 0.000 - 0.000 - 0.000			
		ining		
Data Processing Computer Pro		Other IT consulting		
Engineering Architect Services		Environmental	Services	
Health Services Mental Health	Services			
Accounting Auditing Pa	ralegal 🛛 🖾 Leg	al Other Consul	ting	
	Number of	Number of	Amount Payable	
Employment Category	Employees	Hours Worked	Under the Contract	
Regional Arbitrator	1.00	800.00	\$48,600.00	
	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	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	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	800.00	\$ 0.00	
Grand Total	1.00	800.00	\$48,600.00	

Lehal

Name of person who prepared this report: Jeffrey M. Selchick, Esq.

Title: Regional Arbitrator

Preparer's Signature: _

Date Prepared: 05/05/2016

Phone #: 518-783-0016

(Use additional pages, if necessary)

	New York State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2015 to March 31, 2016 Contracting State Agency Name: Governor's Office of Employee Relations Contract Number: - \$15004 Agency Business Unit: OER01 Contract Term: 111/6 to j213/117 Agency Department ID: 1120000 Contractor Name: The Steven Contractor Address: 2 Contractor Matter 2 Contractor Address: 2 Contractor Address 2 Contractor Add				
Scope of Contract (Choose one that best fits): Analysis Evaluation Data Processing Computer Programming Data Processing Architect Services Engineering Architect Services Health Services Mental Health Services Accounting Auditing					
. 1	Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
4/1/150	A/BITIATOR/LEGAN	/ 0.00	550 0.00	×57,003,00\$0.00	
8/31/16		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	\$0.00	
		0.00			
	Total this Page	0.00	0.00	\$ 0.00	

Muge Phone #: 845-265-3124 Title: 611/juto Preparer's Signature: Date Prepared: A LAST 11 6

New York	State Consultant Services
Contractor's	Annual Employment Report
5.7 m	

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: Go	overnor's Office	of Employee Relation	S
Contract Number: S15005		Agency Business U	nit: OER01
Contract Term: 01/01/2016 to 03/31/2016		Agency Department	ID: 1120000
Contractor Name: Nancy E Hoffman			
Contractor Address: PO Box 3719 Al	lbany, NY 12203	i.	
Description of Services Being Provid	ed: ARBITRATO	DR	
Scope of Contract (Choose one that b	2.2		
	search 🗌 Tra	ining	
Data Processing Computer Pro	ogramming	Other IT consulting	
Engineering Architect Services	s 🗌 Surveying	Environmental	Services
Health Services Mental Health	Services		
Accounting Auditing Pa	iralegal 🗌 Leg	al 🛛 🖾 Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
ARBITRATOR	1.00	160.00	\$14,867.62
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
×	0.00	0.00	\$0.00
	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 \$14,867.62

Name of person who prepared this report: NANCY E. HOFFMAN

Title: ARBITRATOR

Preparer's Signature: <u>Anece 9 Auff</u> Date Prepared: 04/30/2016 Phone #: 518-441-5099

New York	State Consultant Services	
Contractor's	Annual Employment Repor	t

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: 0	Governor's Office	of Employee Relation	S
Contract Number: S110006		Agency Business U	nit: OER01
Contract Term: 01/01/2014 to 12	2/31/2015	Agency Department ID: 1120000	
Contractor Name: Nancy E Hoffman	n		
Contractor Address: PO Box 3719	Albany, NY 12203		
Description of Services Being Provi	ded: ARBITRAT	OR	
Scope of Contract (Choose one that			
		ining	
Data Processing Computer F		Other IT consulting	
Engineering Architect Service		B Environmental	Services
Health Services Mental Heal	1.1.1.1.1		
Accounting Auditing F	Paralegal 🗌 Leç	gal 🛛 Other Consul	ting
	Number of	Number of	Amount Payable
Employment Category	Employees	Hours Worked	Under the Contract
ARBITRATOR	1.00	464.00	\$53,356.47
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	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	464.00	\$53,356.47
Grand Total	1.00	464	\$53 356 47

ma

Name of person who prepared this report: NANCY E HOFFMAN

Aug 8

Title: ARBITRATOR Preparer's Signature: γ Date Prepared: 04/30/2016

Phone #: 518-441-5099

New	York	State Co	onsultant Serv	ices
Contract	tor's	Annual	Employment	Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: Go	overnor's Office of	of Employee Relation	S
Contract Number: T14015		Agency Business Unit: OER01	
Contract Term: 6/1/2014 to 6/30/2	2016	Agency Department ID: 1120000	
Contractor Name: RM Robinson Solu	utions LLC		
Contractor Address: 9 W Tulpehocke	en St, Philadelph	ia, PA 19144	
Description of Services Being Provid	ed: Job Skills Tr	raining Program	
Scope of Contract (Choose one that b			
	search 🛛 Tra		
Data Processing Computer Pr		Other IT consulting	
Engineering Architect Services		Environmental	Services
Health Services Mental Health		21 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -	
Accounting Auditing Pa	aralegal Leg	al 🗌 Other Consul	ting
	Number of	Number of	Amount Payable
Employment Category	Employees	Hours Worked	Under the Contract
Instruction	1.00	72.00	\$10,500.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
V-S IN MILLION FOR		V20 Service	Service and the service of the servi
Total this Page	1.00	72.00	\$10,500.00

Name of person who prepared this report: Regina Robinson

Title: President //

Date Prepared: 5/12/2016

Phone #: 267-251-8326

New York	State Co	onsultant Services	5
Contractor's	Annual	Employment Re	port

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: G	Sovernor's Office of	of Employee Relation	S
Contract Number: T14016		Agency Business U	nit: OER01
Contract Term: 1/1/2014 to 6/30/	ntract Term: 1/1/2014 to 6/30/2016 Agency Department ID: 1120000		ID: 1120000
Contractor Name: Scimia Consulting	g Group, Inc.		
Contractor Address: 3 Church St., #	2-0, Pleasantville	, NY 10570	
Description of Services Being Provid	ded: Training		
	2. 0 10-2011 2		
Scope of Contract (Choose one that			
	esearch 🛛 Tra	•	
Data Processing Computer P	• • • • •	Other IT consulting	23 g
Engineering Architect Service		Environmental	Services
Health Services Mental Health			12
Accounting Auditing P	aralegal 🗌 Leg	al 🗌 Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Training Specialist	1.00	96.00	\$20067.11
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
- and Share	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	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	96.00	\$ 0.00
Grand Total	1.00	96	\$20,067,11

20,067.11

Name of person who prepared this report; Donna Scimia

Title: President/CEO

Phone #: 914-747-2960

Preparer's Signature: Dome Date Prepared: 4/28/2016

(Use additional pages, if necessary)

OSC Use Only: Reporting Code: Category Code:

State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: Governor's Office of Employee Relations
Agency Code: OER01
Contract Number: OER01-T14018-1120000
Contract Term: 07/01/14 to 06/30/16
Contractor Name: Capital Region Language Center, LLC
Contractor Address: 24 Aviation Rd. Suite 100 Albany, NY 12205
Description of Services Being Provided: Adult Education Basics Training Program, English as a
Second Language (ESOL)

Scope of Contract (Choose one th Analysis Evaluation Res Data Processing Computer Pr Engineering Architect Services Health Services Mental Health Accounting Auditing Par	earch Training X ogramming Othe s Surveying Services	er IT consulting Environmental Servic	es 🗌
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Training and Development Specialist	2	102	20,400.
Total this page	7	102	20,400
Grand Total	2	102	20,400

Name of person who prepared t	this report: Kimberly M Andersen	
Preparer's Signature: Club	why Matalue	
Title: Owner /	Phone #: 518-729-5407	
Date Prepared: 05/02/2016	0	

(Use additional pages if necessary)

Contractor's	Annual Em	ultant Services ployment Rep to March 31, 201	
Contracting State Agency Name: Ge Contract Number: T14019 Contract Term: 07/01/2014 to 06/ Contractor Name: Glenville Commur Contractor Address: 26 Jennifer Roa Description of Services Being Provid	/30/2016 nications nd, Glenville, NY 1	Agency Business U Agency Department	nit: OER01
□ Data Processing □ Computer Pr □ Engineering □ Architect Services □ Health Services □ Mental Health	search 🖾 Trail ogramming 🔲 s 🗌 Surveying	Other IT consulting	
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Training and Development Specialists	2.00	432.00	\$24,300.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	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	432.00	\$24,300.00
Grand Total		432	\$24,300.00

Name of person who prepared this report: Carl Filbrich

CarlFulonich

Title: Owner

Preparer's Signature:

Phone #: 518-320-6768

Date Prepared: 04/29/2016

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: Go	overnor's Office of	of Employee Relations	6
Contract Number: T14020	Agency Business Unit: OER01		
Contract Term: 07/01/2014 to 06/3	Agency Department	ID: 1120000	
Contractor Name: John Paul Kowalcl	hyk		
Contractor Address: 211 Lower Rock	y Point Road, Se	ound Beach, NY 1178	39-1000
Description of Services Being Provide	ed: Math Adult I	Education Basics Trai	ning
Seene of Contract (Change and that h			
Scope of Contract (Choose one that b	search 🛛 Tra	ining	
Data Processing Computer Pro		Other IT consulting	
Engineering Architect Services	• • -	•	Sonvioos
Health Services			Services
	ralegal Leg	al 🗌 Other Consult	ting
	T		ling
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Training and Development Spec	1.00	252.00	\$20,005.38
	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	1.00	252.00	\$20,005.38
Grand Total	1.00	252	\$20,005.38

Name of person who prepared this report: John Paul Kowalchyk

Title: Consultant

Preparer's Signature:

Date Prepared: 4/30/2016

(Use additional pages, if necessary)

Phone #: 6317023498

	New York State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2015 to March 31, 2016				
Contracting State Agency Name: Governor's Office of Employee Relations Contract Number: T14022 Agency Business Unit: OER01 Contract Term: 07/01/2014 to 06/30/2016 Agency Department ID: 1120000 Contractor Name: Research Foundation of CUNY Contractor Address: 230 West 41 st Street, New York, NY 10036 Description of Services Being Provided: LaGuardia Community college provided adult basic Skills training for th CSEA Partnership as part of the GOERS contract					
Ana Ana Data Eng Hea	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 Other Consulting				
	Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
	Adult Basic Education				
Instruct	Adult Basic Education	Employees	Hours Worked	Under the Contract	
Instruct	Adult Basic Education tor	Employees 3.00	Hours Worked 358.00	Under the Contract \$18,195.61	
Instruct	Adult Basic Education tor	Employees 3.00 1.00	Hours Worked 358.00 96.00	Under the Contract \$18,195.61 \$2,837.47	
Instruct	Adult Basic Education tor	Employees 3.00 1.00 0.00	Hours Worked 358.00 96.00 0.00	Under the Contract \$18,195.61 \$2,837.47 \$0.00	
Instruct	Adult Basic Education tor	Employees 3.00 1.00 0.00 0.00	Hours Worked 358.00 96.00 0.00 0.00	Under the Contract \$18,195.61 \$2,837.47 \$0.00 \$0.00	
Instruct	Adult Basic Education tor	Employees 3.00 1.00 0.00 0.00 0.00	Hours Worked 358.00 96.00 0.00 0.00 0.00	Under the Contract \$18,195.61 \$2,837.47 \$0.00 \$0.00 \$0.00	
Instruct	Adult Basic Education tor	Employees 3.00 1.00 0.00 0.00 0.00 0.00	Hours Worked 358.00 96.00 0.00 0.00 0.00 0.00	Under the Contract \$18,195.61 \$2,837.47 \$0.00 \$0.00 \$0.00 \$0.00	
Instruct	Adult Basic Education tor	Employees 3.00 1.00 0.00 0.00 0.00 0.00 0.00 0.00	Hours Worked 358.00 96.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$18,195.61 \$2,837.47 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
Instruct	Adult Basic Education tor	Employees 3.00 1.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Hours Worked 358.00 96.00 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$18,195.61 \$2,837.47 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
Instruct	Adult Basic Education tor	Employees 3.00 1.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Hours Worked 358.00 96.00 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$18,195.61 \$2,837.47 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
Instruct	Adult Basic Education tor	Employees 3.00 1.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Hours Worked 358.00 96.00 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$18,195.61 \$2,837.47 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
Instruct	Adult Basic Education tor	Employees 3.00 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	Hours Worked 358.00 96.00 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$18,195.61 \$2,837.47 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
Instruct	Adult Basic Education tor	Employees 3.00 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	Hours Worked 358.00 96.00 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$18,195.61 \$2,837.47 \$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: Denise Xie

Juitino Vo

Title: Project Administrator

Phone #: 212-417-8448

Preparer's Signature:

Date Prepared: 05/10/2016

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2015 to March 31, 2016

Contracting State Agency Name: G	overnor's Office of	of Employee Relation	S
Contract Number: T14023		Agency Business U	nit: OER01
Contract Term: 7/1/2014 to 6/30/2	2016		
Contractor Name: RM Robinson Sol	utions LLC		
Contractor Address: 9 W Tulpehocke	en St, Philadelph	ia, PA 19144	
Description of Services Being Provid	led: Adult Educa	tion Basics	
Scope of Contract (Choose one that h			
	esearch 🛛 Trai	J	
Data Processing Computer Pr		Other IT consulting	
Engineering Architect Service	_ , ;	Environmental	Services
Health Services Mental Health		—	
Accounting Auditing Pa	aralegal 🗌 Leg	al Other Consul	ting
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
Instruction	1.00	42.00	\$6,125.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	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	42.00	\$6,125.00
Grand Total	1.00	42	\$6,125.00

Name of person who prepared this report: Regina Robinson

Title: President 1 Phone #: 267-251-8326 Preparer's Signature: Date Prepared: 5/12/2016

AC 3272-S (Effective	4/12)
10 0010 01	Linoouse	11161

Contractor's	Annual Em	Iltant Services ployment Rep to March 31, 201			
Contracting State Agency Name: Go Contract Number: 0000000123 Contract Term: 12/1/15 to 12/31/1 Contractor Name: Michael J. Smith Contractor Address: 84 Parkwyn Driv Description of Services Being Provide CSEA/NYS	6 e, Delmar NY 12	Agency Business Un Agency Department	nit: OER01 ID: 1120000		
Scope of Contract (Choose one that best fits): Analysis Evaluation Data Processing Computer Programming Other IT consulting Engineering Architect Services Health Services Mental Health Services Accounting Paralegal					
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
Arbitrator CODE 23-1022.00	1.00	984	\$54,047.02		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00				
	0.00	0.00	\$0.00		
	0.00	0.00	\$0.00		
	0.00	0.00 0.00	\$0.00 \$0.00		
	0.00 0.00 0.00	0.00 0.00 . 0.00	\$0.00 \$0.00 \$0.00		
	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00		
	0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
	0.00 0.00 0.00 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 \$0.00 \$0.00 \$0.00 \$0.00		

Name of person who prepared this report: Michael J. Smith

Title: EDR Arbitrator

Preparer's Signature: ______/ ____

Date Prepared: 5/11/16

(Use additional pages, if necessary)

Phone #: 518-439-1411

Page of

New York State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2015 to March 31, 2016							
Contracting State Agency Name: Go Contract Number: 9/0 00000000 Contract Term: 9 1/ 12015 to 3 1 Contractor Name: Better Living Contractor Address: 2 Hillcre Description of Services Being Provid	294 31 2016 Life Ceach 1 Drive Br	Agency Busin Agency Depa Inc (M	ness U artment wBE	nit: OER01 : ID: 112000)	0		
Data Processing Computer Processing Computer Processing Architect Services Health Services Mental Health	search 🗗 Trai ogramming 🔲 s 🗌 Surveying	Other IT consu	1.5041	Services ting			
k 7		Number of Hours Worked		Amount Payable Under the Contract			
Employment Category	Number of Employees						
	The second s	Hours Worl					
Employment Category Thaning	Employees		ked		Contract		
	Employees	Hours Worl	ced		Sontract		
	Employees / 0.00 0.00	Hours Worl	ced 0.00		Contract \$0.00 \$0.00		
	Employees / 0.00 0.00 0.00	Hours Worl	ced 0.00 0.00		Sontract \$0.00 \$0.00 \$0.00		
	Employees / 0.00 0.00 0.00 0.00	Hours Worl	ced 0.00 0.00 0.00 0.00		Contract \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
	Employees / 0.00 0.00 0.00 0.00 0.00	Hours Worl	ced 0.00 0.00 0.00 0.00 0.00		Contract \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
	Employees / .0.00 0.00 0.00 0.00 0.00	Hours Worl	ced 0.00 0.00 0.00 0.00 0.00 0.00		Contract \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
	Employees / 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Hours Worl	ced 0.00 0.00 0.00 0.00 0.00 0.00 0.00		Contract \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
	Employees / 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Hours Worl	ced 0.00 0.00 0.00 0.00 0.00 0.00 0.00		Contract \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
	Employees / 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Hours Worl	ked 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00		Contract \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
	Employees / 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	Hours Worl	Q.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		Contract \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
	Employees / 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	Hours Worl	Q.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00		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		
	Employees / 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Hours Worl	Q.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00		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		

Name of person who prepared this report:

Title: Qurer

Preparer's Signature:

Date Prepared: 5/1/16

(Use additional pages, if necessary)

Phone #: 914 260-2668

Page of

Contractor's	Annual Em	ultant Services ployment Rep to March 31, 201				
Contracting State Agency Name: Go Contract Number: 00000002 Contract Term: 9/1/2015 to 3/2 Contractor Name: Lesa Dens Contractor Address: OF Frost in Description of Services Being Provide	99	Agency Business U	nit: OER01			
Scope of Contract (Choose one that best fits): Analysis Evaluation Data Processing Computer Programming Engineering Architect Services Health Services Mental Health Services Accounting Paralegal						
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract			
Training and	0.00	10.5 0.00	21.1AU3 \$0.00			
levelipment Specialisi	0.00	0.00	\$0.00			
and the street	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	0.00	0.00	\$0.00			
	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	261043 \$ 0.00			
Grand Total			21,043			

Name of person who prepared this report:

Phone #: (00-Title: Preparer's Signature: Date Prepared 5102010

(Use additional pages, if necessary)

7-221-0157