## Mohawk Valley Psychiatric Center

3650433

FORM B		OSC Han G	
		OSC Use O	_
		Reporting C	
		Category Co	ode.
	State Consulta	int Services	
Cont		Employment Report	
Report	Period: April 1, 20	018 to March 31, 201	9
Contracting State Agency Name Contract Number: OMH01-T00 Contract Term: 12/01/2015 to Contractor Name: Resource Cel Contractor Address: 409 Columb Description of Services Being Pro-	0229-3650433 11/30/2018 nter for Independ bia Street, P.O. E	ent Living (RCIL) Box 210, Utica, NY	365043
Scope of Contract (Choose one that Analysis   Evaluation   Resear Data Processing   Computer Progressing   Architect Services   Health Services   Mental Health Services   Accounting   Auditing   Parale	rch	Tr IT consulting  Environmental Service  Other Consulting	es 🗌
*Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
25-3011.00 Adult Literacy/GED Teachers	01	85.5	\$2,394.00
Total this page	01	85.5	\$2,394.00
Grand Total	01	85.5	\$2,394.00

Name of person who prepared this report: Kristin E Fey				
- Preparer's Signature:	Kusto	& fey		
Title: Finance Analyst Manager		Phone #:0315-797-4642 x 2955		
Date Prepared: 04/23/2019				

Use additional pages if necessary)

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(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.)

## Consultant Disclosure Form B

In 2006 the NYS State Finance Law was amended to require State contractors who provide consulting services to disclose, by employment category, the number of persons employed to provide services under a contract for

<sup>\*</sup>Employment Category: the specific occupation(s), as listed in the O\*NET occupational classification system, which best describe the employees providing services under the contract.