## Central New York Developmental Disabilities Service Office 3660234

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| Category Code:  |           |

## **State Consultant Services**

| Contractor's Annual Employment Report  |  |  |                                   |  |  |  |  |
|--|--|--|-----------------------------------|--|--|--|--|
| Report Period: April 1, 2018 to March 31, 2019   |  |  |                                   |  |  |  |  |
| Contracting State Agency Name: OPWDD Central NY DDSOO Agency Code: 34  |  |  |                                   |  |  |  |  |
| Contract Number: C0SCN00152<br>Contract Term: 03/01/2018 to 02/2   |  | •  |                                   |  |  |  |  |
| Contractor Address: 1 Computer D   | Contractor Name: The Nurse Connection Staffing, Inc. Contractor Address: 1 Computer Drive South Suite #1 Albany, NY 12205 Description of Services Being Provided: Sitter Service |  |                                   |  |  |  |  |
|  |  |  |                                   |  |  |  |  |
|  |  | ***************************************                      |                                   |  |  |  |  |
| Scope of Contract (Choose one that Analysis  Evaluation  Reserved Processing  Computer Processing  Architect Services Health Services  Mental Health Services  Accounting  Auditing  Paral | arch   | ] r IT consulting ☐ Environmental Service Other Consulting ☐ |                                   |  |  |  |  |
| Employment Category  | Number of Employees  | Number of Hours Worked                                       | Amount Payable Under the Contract |  |  |  |  |
| 31-1012.00   | 338  | 2120.50  | 146,651.00                        |  |  |  |  |
|  | -  |  |                                   |  |  |  |  |
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|  | 40444  |  |                                   |  |  |  |  |
| Total this page  | . 0  | . 0  | \$ 0.00                           |  |  |  |  |
| Grand Total  | 338  | 2120.50  | 1846,651.00                       |  |  |  |  |
|  |  |  |                                   |  |  |  |  |
| Name of person who prepared this   | s-report:  |  |                                   |  |  |  |  |
| Preparer's Signature: 1. Kuy  Title: Director of Operational Phone #: 518 - 459 - 14012: X 103   |  |  |                                   |  |  |  |  |
| Date Prepared: 4 /34 / 19  |  |  |                                   |  |  |  |  |
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Use additional pages if necessary)

| FORM B  | OSC Use Or<br>Reporting Co<br>Category Co                                     | da:   |                              |  |  |
|---|---|---|------------------------------|--|--|
| State Consultant Services Contractor's Annual Employment Report   |   |   |                              |  |  |
| Keport Per  | iod: April 1, 2018 to   | o March 31, 2019  |                              |  |  |
| Contracting State Agency Name: Contract Number: C0SCN00154 Contract Term: 03/01/2018 to 02/20 Contractor Name: Worldwide Trave Contractor Address: 2829 Sheridar Description of Services Being Prov | 8/2023<br>el Staffing Limited<br>n Drive Tonawanda,                           |   | ode: <b>51240</b><br>3660234 |  |  |
| Data Processing ☐ Computer Proc<br>Engineering ☐ Architect Services ☐<br>Health Services ☑ Mental Health Se<br>Accounting ☐ Auditing ☐ Paral  | erch Training C<br>gramming Other<br>Surveying C<br>ervices C<br>egal Legal C | r IT consulting   Environmental Service  Other Consulting | s                            |  |  |
| Employment Category  31-1012.00   | Number of Employees   | Number of Hours Worked 3/25                               | the Contract<br>약 6명 이 나니    |  |  |
|   |   |   |                              |  |  |
| Total this page   | 0   | 0   | \$ 0.00                      |  |  |
| Grand Total   | <u> </u>  | 3/.25   | ¥998.44                      |  |  |
| Name of person who prepared this Preparer's Signature:  Title: CFO  Date Prepared: FIIII  | - R Blut  | Blatz<br>one #: 716-821-90                                | Ol Page 4 of /               |  |  |

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| FORM B  |   | OSC Use Or<br>Reporting Co<br>Category Co          | ode:                              |
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| · .   | State Consultant Se   | · · · · · · · · · · · · · · · · · · ·              |                                   |
|   | ractor's Annual Emplo   | •  | •                                 |
| Report  | Period: April 1, 2018 to  | o March 31, 2019                                   |                                   |
| Contracting State Agency Nam<br>Contract Number: C0SCN0015<br>Contract Term: 03/01/2018 to 0<br>Contractor Name: Homemakers<br>Contractor Address: 2465 Sher<br>Description of Services Being F | 6<br>i2/28/2023<br>s of the Mohawk Valley,<br>idan Drive Tonawanda,   | 3 <i>Q</i>   | 60de: 51240<br>60234              |
|   |   | I<br>r IT consulting ☐<br>Environmental Service    |                                   |
| Accounting Auditing P   | h Services  aralegal Legal  | Other Consulting                                   |                                   |
| Accounting Auditing P   | h Services  | Other Consulting   Number of Hours Worked          | Amount Payable Unde               |
| Accounting Auditing P   | h Services  aralegal Legal  | Other Consulting                                   | Amount Payable Unde               |
| Accounting Auditing P   | h Services  aralegal Legal  | Other Consulting   Number of Hours Worked          | Amount Payable Unde               |
| Accounting Auditing P   | h Services  aralegal Legal  | Other Consulting   Number of Hours Worked          | Amount Payable Unde               |
| Accounting Auditing P   | h Services  aralegal Legal  | Other Consulting   Number of Hours Worked          | Amount Payable Unde               |
| Accounting Auditing P   | h Services  aralegal Legal  | Other Consulting   Number of Hours Worked          | Amount Payable Unde               |
| Accounting Auditing P   | h Services  aralegal Legal  | Other Consulting   Number of Hours Worked          | Amount Payable Unde               |
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| Accounting Auditing P   | h Services  aralegal Legal  | Other Consulting   Number of Hours Worked          | Amount Payable Unde               |
| Accounting Auditing P   | h Services  aralegal Legal  | Other Consulting   Number of Hours Worked  1112.35 | Amount Payable Under the Contract |
| Accounting Auditing P  Employment Category  31-1012.00  | h Services  Legal  Legal  Number of Employees   | Other Consulting   Number of Hours Worked          | Amount Payable Unde               |
| Accounting Auditing P  Employment Category  31-1012.00  Total this page  Grand Total  | h Services  Legal  Legal  Number of Employees   | Other Consulting   Number of Hours Worked  1112.25 | Amount Payable Under the Contract |
| Accounting Auditing P  Employment Category  31-1012.00  Total this page Grand Total  Name of person who prepared  | h Services  aralegal Legal  Number of Employees  15  15  this report: CARMEN                                | Other Consulting   Number of Hours Worked  112.25  | Amount Payable Under the Contract |
| Accounting Auditing P  Employment Category  31-1012.00  Total this page  Grand Total  | h Services aralegal Legal Number of Employees    Number of Employees   15   15   15   15   15   15   15   1 | Other Consulting   Number of Hours Worked  1112.25 | Amount Payable Under the Contract |

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## **State Consultant Services**

| Contrac   | tor's Annual Empl                                       | oyment Report          | ·                    |  |  |  |
|---|---|------------------------|----------------------|--|--|--|
| Report Period: April 1, 2018 to March 31, 2019  |   |                        |                      |  |  |  |
|   |   |                        |                      |  |  |  |
| Contracting State Agency Name: (Agency Code: 51240 3((((()())))) Contract Number: C461882 Contract Term: 05/01/2014 to 04/3 Contractor Name: Costello Sr. – A Contractor Address: 131 Main St. Description of Services Being Production | Ψ<br>30/2019<br>Allen Eye Assoc.<br>Suite 202 Oneida, N |                        | <b>4</b>             |  |  |  |
| · —   | earch   | r IT consulting 🔲      |                      |  |  |  |
| Employment Category   | Number of Employees                                     | Number of Hours Worked | Amount Payable Under |  |  |  |
| 29-1041.00  |   | 2-per Visi             |                      |  |  |  |
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|   |   |                        |                      |  |  |  |
| Total this page   | 0   | 0                      | \$ 0.00              |  |  |  |
| Grand Total   |   |                        | 8925.00              |  |  |  |
|   | ./  |                        |                      |  |  |  |
| Name of person who prepared this  | port:   |                        |                      |  |  |  |
| Preparer's Signature:   |   | 315-36                 | 5-494g               |  |  |  |
| Title: OD///Whe   | Ph:   | one #:                 |                      |  |  |  |
| Date Prepared: 5/ 4 19  |   |                        |                      |  |  |  |
| Use additional pages if necessary)  |   |                        | Page of              |  |  |  |