

CONTRACTOR DISCLOSURE FORM A

AC 271-S (Effective 4/12)

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

State Agency Name: NYS Workers' Compensation Board
 State Agency Department ID: 3560000
 Agency Business Unit: WCB01
 Contractor Name: Prime Actuarial Consulting LLC
 Contract Number: C140400
 Contract Start Date: 07/01/2020
 Contract End Date: 06/30/2023

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
15-2011.00 Actuaries	6	4800	\$1,200,000.00
Total this page	6	4800	\$ 1,200,000.00
Grand Total	6	4800	\$1,200,000.00

Name of person who prepared this report: Rian Potvin
 Title: Administrative Services Manager
 Preparer's Signature: Phone #: 916-244-1132
 Date Prepared: 04/30/2020