## Long Island Power Authority 6015200

## FORM B

## New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2021 to March 31, 2022

|   | LIPA                  |              | 1.5                |
|---|-----------------------|--------------|--------------------|
| Contract Number: PH68607  | Agency Business Unit: |              |                    |
| Contract Term: 07/01/2019 to 06/30/2024 Agency Department ID:               |                       |              |                    |
| Contractor Name: Crossfire Consulting Corp                                  |                       |              |                    |
| Contractor Address: 1940 Commerce Street, Yorktown Heights, NY 10598        |                       |              |                    |
| Description of Services Being Provided: Hourly Based Information Technology |                       |              |                    |
|   |                       |              |                    |
| 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                                  |                       |              |                    |
| ☐ Accounting ☐ Auditing ☐ Paralegal ☐ Legal ☐ Other Consulting              |                       |              |                    |
|   | Number of             | Number of    | Amount Payable     |
| Employment Category   | Employees             | Hours Worked | Under the Contract |
| IT Specialist   | 1.00                  | 608.00       | \$43,776.00        |
|   | 0.00                  | 0.00         | \$0.00             |
|   | 0.00                  | 0.00         | \$0.00             |
|   | 0.00                  | 0.00         | \$0.00             |
|   | 0.00                  | 0.00         | \$0.00             |
|   | 0.00                  | 0.00         | \$0.00             |
|   | 0.00                  | 0.00         | \$0.00             |
|   | 0.00                  | 0.00         | \$0.00             |
| . '   | 0.00                  | 0.00         | \$0.00             |
|   | 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                  | 608.00       | \$43,776.00        |
| Grand Total   | 1.00                  | 608          | \$43,776.00        |
|   |                       |              |                    |
| Name of person who prepared this report: Maureen Kruze                      |                       |              |                    |
| Title: Administrator Phone #: 914-302-2900                                  |                       |              |                    |
| Preparer's Signature:   |                       |              |                    |
| Date Prepared: 05/12/2022   |                       |              |                    |
|   |                       |              |                    |

(Use additional pages, if necessary)