WCB01-C140372-3560000

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: Paper Alternative Solutions, Inc.
 Contract Number: C140372

 Contract Start Date: 01/15/2018
 Contract End Date: 01/14/2019

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Quality Control Systems Manager – 11-3051.01	1	2,080	\$148,125.00
Network & Computer Systems Administrators – 15-1142.00	2	370	\$26,803.60
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77		-	
Total this page	3	2,450	\$174,928.60
Grand Total		2,400	φ17 4 ,520.00

Name of person who prepared this report: Molly McGowan

Title: President

Preparer's Signature: Multiple Date Prepared: 01/22/18 Phone #: 607 221 1250

Use additional pages if necessary

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