Fishkill Correctional Facility 3250222

AC 3272-S (Effective 4/12)

FORM B

New York State Consultant Services Contractor's Annual Employment Report Report Period: April 1, 2023 to March 31, 2024					
Contracting State Agency Name: Fishkill Correctional Facility Contract Number: FK22A49904 Agency Business Unit: Contract Term: / to / Agency Department ID: Contractor Name: White Glove Placement, Inc. Contractor Address: 89 Bartlett Street Brooklyn NY 11206 Description of Services Being Provided: nursing services Scope of Contract (Choose one that best fits):					
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract		
Employment Category Registered Nurse					
	Employees	Hours Worked	Under the Contract		
	Employees 9.00	Hours Worked 3,025.50	Under the Contract \$230,289.50		
	Employees 9.00 0.00	Hours Worked 3,025.50 0.00	Under the Contract \$230,289.50 \$0.00		
	Employees 9.00 0.00 0.00	Hours Worked 3,025.50 0.00 0.00	Under the Contract \$230,289.50 \$0.00 \$0.00		
	Employees 9.00 0.00 0.00 0.00	Hours Worked 3,025.50 0.00 0.00 0.00	Under the Contract \$230,289.50 \$0.00 \$0.00 \$0.00		
	Employees 9.00 0.00 0.00 0.00 0.00 0.00 0.00	Hours Worked 3,025.50 0.00 0.00 0.00 0.00	Under the Contract \$230,289.50 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
	Employees 9.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 3,025.50 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$230,289.50 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
	Employees 9.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 3,025.50 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Under the Contract \$230,289.50 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
	Employees 9.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 3,025.50 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Under the Contract \$230,289.50 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
	Employees 9.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 3,025.50 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$230,289.50 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
	Employees 9.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 3,025.50 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$230,289.50 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
Registered Nurse	Employees 9.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 3,025.50 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	Under the Contract \$230,289.50 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
	Employees 9.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 3,025.50 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$230,289.50 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		

Name of person who prepared this report: Miri Rosenberg

Title: Manager, Accounts Receivable Preparer's Signature: Miric Rosenberg Phone #: 718-387-8181 x123

(Use additional pages, if necessary)

Date Prepared: 5/8/2024

AC 3272-S (Effective 4/12)

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2023 to March 31, 2024

Contracting State Agency Name: Departme	ent of Corrections and Community Supervision
Contract Number: PS69649	Agency Business Unit: DOC01
Contract Term: 1/20/2023 to 4/19/2024	Agency Department ID: 3250222
Contractor Name: MoxieIT Solutions Inc	
Contractor Address: 44025 Dipoline Diazo	STE #110 Achuburn Virginia 20147

Contractor Address: 44025 Pipeline Plaza, STE #110, Ashuburn, Virginia - 20147 Description of Services Being Provided: Registered Nurses (RN)

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						
Accounting Auditing Pa	ralegal 🗌 Legal 🔲 Other Consulting					
	Number of	Number of	Amount Payable			
Employment Category	Employees	Hours Worked	Under the Contract			
29-1141.00	11.00	5,978.90	\$514,048.66			
· ·	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	11.00	5,978.90	\$ 0.00			
Grand Total	11.00	5978.90	514048.66			

Name of person who prepared this report: Krishna Lam

Title: President

Phone #: 703-763-0777

Preparer's Signature:

Date Prepared: 5/6/2024

(Use additional pages, if necessary)

AC 3272-S (Effective 4/12)

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2023 to March 31, 2024

Contracting State Agency Name: De Contract Number: PS69649 Contract Term: 8/8/2023 to 12/29/		rections and Commur Agency Business Ur Agency Department	nit: DOC01		
Contractor Name: MoxieIT Solutions	Inc				
Contractor Address: 44025 Pipeline Plaza, STE #110, Ashuburn, Virginia - 20147 Description of Services Being Provided: Licensed Practical Nurses (LPN)					
Scope of Contract (Choose one that b	oet fite'):				
		ining			
Data Processing Computer Pro	•••••••	Other IT consulting			
Engineering Architect Services	· · · · · ·	-	Services		
Health Services	; U				
	ralegal 🗌 Leg	al Other Consul	ting		
	Number of	Number of	Americat Develo		
Employment Category			Amount Payable		
Employment Category 29-2061.00	Employees	Hours Worked	Under the Contract		
29-2061.00	Employees 5.00	Hours Worked 1,153.14	Under the Contract \$81,043.33		
	Employees 5.00 0.00	Hours Worked 1,153.14 0.00	Under the Contract \$81,043.33 \$0.00		
29-2061.00	Employees 5.00 0.00 0.00	Hours Worked 1,153.14 0.00 0.00	Under the Contract \$81,043.33 \$0.00 \$0.00		
29-2061.00	Employees 5.00 0.00	Hours Worked 1,153.14 0.00	Under the Contract \$81,043.33 \$0.00 \$0.00 \$0.00		
29-2061.00	Employees 5.00 0.00 0.00 0.00	Hours Worked 1,153.14 0.00 0.00 0.00	Under the Contract \$81,043.33 \$0.00 \$0.00		
29-2061.00	Employees 5.00 0.00 0.00 0.00 0.00	Hours Worked 1,153.14 0.00 0.00 0.00 0.00	Under the Contract \$81,043.33 \$0.00 \$0.00 \$0.00 \$0.00		
29-2061.00	Employees 5.00 0.00 0.00 0.00 0.00 0.00	Hours Worked 1,153.14 0.00 0.00 0.00 0.00 0.00	Under the Contract \$81,043.33 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
29-2061.00	Employees 5.00 0.00 0.00 0.00 0.00 0.00 0.00	Hours Worked 1,153.14 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$81,043.33 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
29-2061.00	Employees 5.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 1,153.14 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$81,043.33 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
29-2061.00	Employees 5.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 1,153.14 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$81,043.33 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		
29-2061.00	Employees 5.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Hours Worked 1,153.14 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	Under the Contract \$81,043.33 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00		

5.00

5.00

Name of person who prepared this report: Krishna Lam

Title: President

Phone #: 703-763-0777

1,153.14

1,153.14

Preparer's Signature: _____ Date Prepared: 5/6/2024

(Use additional pages, if necessary)

Total this Page

Grand Total

\$81,043.33

81043.33