

**Appendix G**

**Agreement between the New York State Office of General Services and  
POD Inc.  
for Project Based Information Technology Consulting Services**

**Contract Number: PB20400**

**Table of Contents**

<b>Contractor Information/ Designated Personnel</b>	<b>2-3</b>
<b>OGS Contract Information</b>	<b>4</b>
<b>Procurement Card Information</b>	<b>5</b>

<u><b>Lot(s) Awarded:</b></u>	
<b>Lot Number</b>	<b>Date</b>
2	September 9, 2015

<b>LEGAL BUSINESS NAME:</b>	POD Inc.
<b>FEDERAL ID:</b>	850367128
<b>NYS VENDOR ID:</b>	1100137179
<b>CONTRACT NUMBER:</b>	PB20400

Contract Citation:  
 4.7.1 Contractor Information  
 The Contractor will provide up to date information for each of the following in the form and manner specified by OGS:

1. A designated Account Manager for the OGS Centralized Contract. The Account Manager is responsible for the overall relationship with the State during the course of the Contract and shall act as the central point of contact.
2. A designated Billing Contact. The Billing Contact will become the single point of contact between the Contractor and the Authorized User for matters related to invoicing, billing and payment.
3. A designated Emergency Contact. The Emergency Contact will be available to OGS 24 hours a day, 365 days per year.
4. A designated Email Address for this Contract. This Email address will be published on the OGS website for this Contract for use by all Authorized Users when distributing Mini-Bid Participation Forms and Mini-Bid Templates. This can be the email of a designated Account Manager or a dedicated generic email account that multiple employees can access.

**Contractor/Company Information**

<b>Company Name:</b>	POD, Inc.
<b>Doing Business As:</b>	POD
<b>Address:</b>	5971 Jefferson NE Ste 101
	Albuquerque, NM 87109
<b>Website:</b>	www.poddatasolutions.com
<b>Federal ID #:</b>	85-0367128
<b>NYS Vendor ID #:</b>	1100137179

1. Account Manager	
<b>Contact Name:</b>	Samantha Lapin
<b>Title:</b>	President and CEO
<b>Address:</b>	5971 Jefferson NE Ste 101
	Albuquerque, NM 87109
<b>Telephone:</b>	505-243-2287
<b>Fax Number:</b>	505-243-4677
<b>E-Mail:</b>	Samatha.lapin@poddatasolutions.com

2. Billing Contact	
<b>Contact Name:</b>	Carol Swanson
<b>Title:</b>	Accounting
<b>Address:</b>	PO Box 725
	Rapid City, SD 57709-0725
<b>Telephone:</b>	605-394-6516
<b>Fax Number:</b>	605-394-6514
<b>E-Mail:</b>	carol.swanson@respec.com

3. Emergency Contact	
<b>Contact Name:</b>	Samantha Lapin
<b>Title:</b>	President and CEO
<b>Address:</b>	5971 Jefferson NE Ste 101
	Albuquerque, NM 87109
<b>Telephone:</b>	505-243-2287
<b>Fax Number:</b>	505-243-4677
<b>E-Mail:</b>	Samatha.lapin@poddatasolutions.com

4. Designated Email Address for this Contract	
<b>E-mail:</b>	<a href="mailto:Samatha.lapin@poddatasolutions.com">Samatha.lapin@poddatasolutions.com</a> and <a href="mailto:Rebecca.glover@poddatasolutions.com">Rebecca.glover@poddatasolutions.com</a>

<b>OGS Contract Manager:</b>	
<b>Name:</b>	Nancy Dougherty
<b>Title:</b>	Contract Management Specialist
<b>Phone:</b>	518-408-3265
<b>Fax:</b>	PBITS.Contractors@ogs.ny.gov
<b>E-mail:</b>	Nancy Dougherty

**Authorized Users**

Please address all inquiries to the Contract Manager listed above.

**Contractors**

Please submit all Appendix C Contract Modifications, Appendix G Contractor Information updates, proof of insurance and all other inquiries to the Contract Manager listed above.

<b>LEGAL BUSINESS NAME:</b>	POD Inc.
<b>FEDERAL ID:</b>	850367128
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QUESTION	YES	NO
1. Will the Contractor accept the New York State Procurement Card?		x
2. If "Yes", enter any dollar limit on orders for which the Contractor will accept the NYS Procurement Card.	Enter Amount	