

West Virginia Ethics Commission
Disclosure of Interested Parties to Contracts

(Required by W. Va. Code § 6D-1-2)

Name of Contracting Business Entity: Syra Health Corp. Address: 1119 Keystone Way, Suite 201
Carmel, IN 46032

Name of Authorized Agent: Deepika Vuppalanchi Address: Same as above

Contract Number: ARFQ-0506-BHH2300000005-4 Contract Description: Direct Care Staffing

Governmental agency awarding contract: Department of Health and Human Resources Purchasing Division

Check here if this is a Supplemental Disclosure

List the Names of Interested Parties to the contract which are known or reasonably anticipated by the contracting business entity for each category below (*attach additional pages if necessary*):

1. Subcontractors or other entities performing work or service under the Contract

Check here if none, otherwise list entity/individual names below.

2. Any person or entity who owns 25% or more of contracting entity (not applicable to publicly traded entities)

Check here if none, otherwise list entity/individual names below.

Deepika Vuppalanchi, Sandeep Allam

3. Any person or entity that facilitated, or negotiated the terms of, the applicable contract (excluding legal services related to the negotiation or drafting of the applicable contract)

Check here if none, otherwise list entity/individual names below.

Signature: V. Deepika

Date Signed: 5/30/2023

Notary Verification

State of Indiana, County of Hamilton:

I, Colette Hardesty, the authorized agent of the contracting business entity listed above, being duly sworn, acknowledge that the Disclosure herein is being made under oath and under the penalty of perjury.

Taken, sworn to and subscribed before me this 30th day of May, 2023.

Colette Hardesty
Notary Public's Signature

To be completed by State Agency:

Date Received by State Agency: _____

Date submitted to Ethics Commission: _____

Governmental agency submitting Disclosure: _____

