Consultant Disclosure Form A

OSC Use Only:
Reporting Code:
Category Code:
Date Contract Approved:

FORM A

State Consultant Services - Contractor's Planned Employment From Contract Start Date Through The End Of The Contract Term

State Agency Name: City University of New York	Agency Code: CNY01
Contractor Name: Research Foundation of CUNY	Contract Number: C161812
Contract Start Date: 07/01/2016	Contract End Date: 06/30/2018

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
MOU#016-028 (RF 54862-0004,0005)			
27-2012.03 Program Directors	4	3467.9	$224,625.08
11-3011.00 Administrative Services Managers	7	3264.86	$133,933.37
13-1199.00 Business Operations Specialist, All Other	7	745.39	$46,430.00
15-2031.00 Operations Research Analysts	17	15018.65	$700,156.71
11-3031.00 Financial Managers	2	200	$10,000.00
Total this page			$1,115,145.16
Grand Total			

Name of person who prepared this report: Yong Hwang

Title: Manager, Grants and Contract **Phone #:** 212-417-8490

Preparer's Signature: _____

Date Prepared: 10/29/18

(Use additional pages, if necessary)