

DOH01 - S034061 - 3450000

Reporting Code : CUB

OSC Use Only:

Reporting Code: CUB

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: NYS Department of Health

Agency Code: 12000

Contractor Name: Donald Wexler, MD

Contract Number: S034061

Contract Start Date: 1/1/2019

Contract End Date: 12/31/2019

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Physicians and Surgeons	1	900	\$67,500
Total this page	1	900	\$ 67,500
Grand Total	1	900	\$67,500

Name of person who prepared this report: Donald Wexler, MD

Title: Sole Proprietor

Phone #: 518-265-2758

Preparer's Signature: *Donald Wexler*

Date Prepared: 11/6/2018

(Use additional pages, if necessary)

Page of