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

Form A

Date Prepared:

State Consultant Services – Contractor's Planned Employment From Contract State Date Through the End of the Contract Term

State Agency Name:	SUNY Upstate Medical University		Agency Code:	28110		
Contractor Name: State Em Jen Contract Number: C-504408 Contract Start Date (1)/3/1/22						
Employment Categ	ory/Description	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract		
29-9099.0 + 1/655 fees +	o Hotthans	4	17,160	41,125,000		
Total This	s Page	4	17,160	***/ J 4/0.00)		
Grand T	Cotal	4	17,160	\$1,146,000		
Name of person who prepared this report Barbara Jasass. Title: S. Contracts Admin. Phone #: 315-464-4650 Preparer's Signature Barbara Day						