OSC Use Only:		
Reporting Code:		
Category Code:		
Date Contract Appro	oved:	

FORM A

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

State Agency Name: Story Brook university Medical Center Agency Code: 28050 Contract Number: C011367 Contractor Name: Tact compation of NYC Contract Start Date: 61 (169 Contract End Date: 6// / 22

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract	561
29-1141,00	24	17500	4,286,250	102,90
19-1141,00	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	2500	to 500	115.00
9-1141,00	52	31000	-2,511,000	20018
9-1141,00	4	4500	384750	30,78
9-1141.00	2	2000	186,000	14,880
9-1141,00	5	7100	-596,400	47,71
9-1191,00	8	10 000	780,000	62,400
9-1141,00	18	10481	393,037,50	31,47
9-1191.00	52	50000	1,500,000	120,000
9-1141,00	15	1/232	. 876,096	10,08
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Preparer's Signature:

Date Prepared: 4/1/19

(Use additional pages, if necessary)