

**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:** SUNY Downstate Medical Center      **Agency Code:** 3320218  
**Contractor Name:** White Glove Placement, Inc.      **Contract Number:** C319494  
**Contract Start Date:** January 1, 2019      **Contract End Date:** December 31, 2019

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Hemodialysis RN - Traveler	1	276	\$19,182.00
Hemodialysis RN - Local	1	276	\$17,940.00
Hemodialysis RN - Per Diem	3	303	\$17,878.00
<b>Total this page</b>	5	855	\$55,000.00
<b>Grand Total</b>	5	855	\$55,000.00

**Name of person who prepared this report:** Linda Rivey Markowitz  
**Title:** Acting COO      **Phone #:** 718-387-8163 x 133  
**Preparer's Signature:** *Linda (Rivey) Markowitz*  
**Date Prepared:** 4/2/19  
 (Use additional pages, if necessary)