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

Form A

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: (Contract Start Date	eurosus i Calm	Contract Number:	C/X-504589

Employment Category/Description	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
of collection for	prifes	the distri	atient
\$11,351 over the	Dife 4	the Com	ract
Total This Page Grand Total	8		

Name of person who	prepared this report	Barb	ara		snski
Title: Sen. 0	Contracts	Admi	Phone #:	315-464	1-4650
Preparer's Signature_	Banko	nag	, 9 ax	0,10	l',
Date Prepared: _	11/00/19	/	/		