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: NYS Department of Health

Contractor Name: Dr. Anne Marie Stilwell, MD PC

Contract Start Date: 1/1/2021

Agency Code: 12000

Contract Number: S033304

Contract End Date: 12/31/2021

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable
Physicians and Surgeons	1	540	Under the Contract
			\$40,500.00
otal this page	1	540	
Grand Total	1	540	\$40,500.00
ame of person who prepared the	1	540	\$40,500.00

Manna - C.			_						<u> </u>
Name of	person	who.	Dranarad	thia					
,			bichaten	นแร	report:	Anne	Marie	Stilwall	MD DO
Tilles O. F.	-		_				******	ONIMACII"	IVIU PC

Title: Sole Proprietor

Anne Mane Shivell, MO

Phone #: 7185410745

Preparer's Signature:

Date Prepared: / // און Date Prepared: //

(Use additional pages, if necessary)

Page 1 of 1