

Consultant Disclosure Form A

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: City University of New York	Agency Code: CNY01
Contractor Name: Research Foundation of CUNY	Contract Number: C192025
Contract Start Date: 11/01/2019	Contract End Date: 09/30/2020

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
MOU# 019-025 (RF 50024-0001)			
27-2012.03 Program Directors	1	280	\$22,572.00
Fringe Benefits			\$6,026.72
Total this page		280	\$28,598.72
Grand Total			

Name of person who prepared this report: Yong Hwang

Title: Manager of G&C

Phone #: 212-417-8490

Preparer's Signature:

Date Prepared: 06-21-2021

(Use additional pages, if necessary)

