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 Agency Code: 12000

Contractor Name: Oregon Health & Science University Contract Number: C036337

Contract Start Date: 07/01/2021 Contract End Date: 06/30/2024

| | Number of | Number of hours to | Amount Payable |
|---------------------|-----------|--------------------|--------------------|
| Employment Category | Employees | be worked | Under the Contract |
| Epidemiologists | 11 | 11,191 | \$286,500 |
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| Total this page | 11 | 11,191 | \$286,500 |
| Grand Total | 11 | 11,191 | \$286,500 |

Name of person who prepared this report: Scott Harvey

Title: Department Administrator Phone #: 503-494-9734

Scott Harvey Preparer's Signature:

Date Prepared: 06/29/2021

(Use additional pages, if necessary)

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