

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: Roy L. Nelson, MD Contract Number: S038069
 Contract Start Date: 1/1/2023 Contract End Date: 12/31/2023

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Physicians and Surgeons	1	1,080	\$108,000.00
Total this page	1	1,080	\$108,000.00
Grand Total	1	1,080	\$108,000.00

Name of person who prepared this report: Roy L. Nelson, MD
 Title: Sole Proprietor Phone #: 516-627-5659
 Preparer's Signature: *Roy L. Nelson MD*
 Date Prepared: *12/11/2022*
 (Use additional pages, if necessary) Page 1 of 1