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

Form	Λ

State Consultant Services – Contractor's Planned Employment From Contract Start Date Through the End of the Contract Term

State Agency Name:	SUNY Upstate Medical University	Agency Code:	28110
Contractor Name: U	pstate Urology 7/1/21	Contract Number: Contract End Date:	

Employment Category/Description	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29 - 1229,03	.15	1560	340,650
		£	,
×			
Total This Page			
Grand Total		1560	740,650

Name of person who p Title: Chief Admir Preparer's Signature_	nistrator	Matthew	315-464-8282	
Date Prepared:	4/19/22			_