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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:	SUNY Upstate Medical L	Iniversity	Agency Code	28110
Contractor Name: PSi Contract Start Date 4	Johnstry Faculty H1/22	Pricha Con	ntract Number: C	1K-SO6139 3(31)25

Employment Category/Description	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Psychiatrist	1	1872	*251,958
		-44	
Total This Page			
Grand Total			

100011001050	
Grand Total	
Name of person who prepared this report of the Preparer's Signature Olive Muz Date Prepared:	Phone #: 315-464-3119