Exhibit X			
EXHIBIT A		OSC Use Only: Reporting Code: Category Code:	
FORM A		Date Contract Approved:	
	nt Services - Contrac	ctor's Planned Employme	nt
		ne End Of The Contract T	
State Agency Name: SUNY Upstate Medical University Contractor Name: Description of Medical University Contract Start Date: SII22 Contract End Date: 430123			
Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29-1229.02	,30	624	122,062,00
		·	
		·	
,			
		·	
Total this page		·	
Grand Total			/32,063.ºº
Name of person who prepared this report: Matthew Hotz Title: Chief Administrator Phone #: 315-464-8282			
Proporario Signatura.			

Page

of

Date Prepared: _

(Use additional pages, if necessary)