

FORM A

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

State Agency Name: Hudson Valley DDSOO	Agency Business Unit: OPD01
State Agency Department ID: 3660236	Contract Number: C0SHV00624
Contractor Name: Virtual Medical Care, P.C.	Contract End Date: 08/31/2028
Contract Start Date: 09/01/2023	

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Registered Nurses: 29-1141.00	3.20	3,600.00	\$259,616.70
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	3.20	3,600.00	\$259,616.70
Grand Total	3.20	3,600.00	\$259,616.70

Name of person who prepared this report: David Lotempio

Title: Associate Vice President

Phone #: 716-817-7453

Preparer's Signature: David Lotempio

Date Prepared: 5/30/2023