

Exhibit X

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 University Agency Code: 28110

Contractor Name: Psychiatry Faculty Practice, Inc Contract Number: C-506675
 Contract Start Date: 7/1/23 Contract End Date: 6/30/26

Employment Category/Description	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
<u>Psychiatrist 29-1066.00</u>	<u>25</u>	<u>12,972</u>	<u>3,170,400</u>
Total This Page	<u>25</u>	<u>12,972</u>	<u>3,170,400</u>
Grand Total	<u>25</u>	<u>12,972</u>	<u>3,170,400</u>

Name of person who prepared this report
 Title: Practice Manager Phone #: 315-464-3119
 Preparer's Signature: Oliver Munnich, Practice Mgr
 Date Prepared: 9/25/23