Exhibit X			OSC Use Only: Reporting Code: Category Code: Date Contract Approved:	
FORM A			Date Contract	Approved:
	nt Services - Co	ntractor's Pl	anned Employm	ent
From Contract S				
State Agency Name: SUNY Upstate Medical University Contractor Name: University Dental Associates, LLP			Agency Code: 28110 Contract Number: CX-506950 et End Date: March 31, 2024	
			N. 1 0	
Employment Category	Number of Employees		Number of hours to be worked	Amount Payable Under the Contract
29-1249.00 Surgeon		1	0	\$266,671
Total this page	1		0	\$266,671
Grand Total	1		0	\$266,671

Title: Senior Administrative Specialist
Preparer's Signature:

Date Prepared: February 8, 2024

(Use additional pages, if necessary)

Phone #: 315-464-9810

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