

EXHIBIT X

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: *SUNY Upstate Medical Univ.*
 State Agency Department ID: *3320211* Agency Business Unit: *28110*
 Contractor Name: *Sumbelt Staffing, LLC* Contract Number: *C-504276*
 Contract Start Date: *5/1/17* Contract End Date: *4/30/20*

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
<i>(CNA) Certified Nursing Assistant</i>	<i>10</i>	<i>32,051</i>	<i>\$923,076</i>
<i>(LPN) Licensed Practical Nurse</i>	<i>10</i>	<i>21,368</i>	<i>\$923,076</i>
<i>Mental Health Therapy Aide</i>	<i>10</i>	<i>21,368</i>	<i>\$923,077</i>
<i>Nurse Practitioner</i>	<i>10</i>	<i>9,676</i>	<i>\$923,077</i>
<i>OB Technician</i>	<i>10</i>	<i>15,540</i>	<i>\$923,077</i>
<i>Physician Assistant</i>	<i>10</i>	<i>8,842</i>	<i>\$923,077</i>
<i>Registered Nurse</i>	<i>10</i>	<i>11,148</i>	<i>\$923,077</i>
<i>Patient Safety Companion</i>	<i>10</i>	<i>39,448</i>	<i>\$923,077</i>
<i>Operating Room Technician</i>	<i>10</i>	<i>17,683</i>	<i>\$923,077</i>
<i>Anesthesia Technician</i>	<i>10</i>	<i>12,821</i>	<i>\$923,077</i>
<i>Echo Technician</i>	<i>10</i>	<i>11,655</i>	<i>\$923,077</i>
<i>EKG Technician</i>	<i>10</i>	<i>11,655</i>	<i>\$923,077</i>
<i>Clinical Lab Technologist</i>	<i>10</i>	<i>12,821</i>	<i>\$923,077</i>
<i>Histotechnologist</i>	<i>10</i>	<i>12,821</i>	<i>\$923,077</i>
<i>Phlebotomist</i>	<i>10</i>	<i>17,094</i>	<i>\$923,077</i>
<i>Occupational Therapist</i>	<i>10</i>	<i>10,684</i>	<i>\$923,077</i>
<i>Occupational Therapy Assistant</i>	<i>10</i>	<i>13,495</i>	<i>\$923,077</i>
Total this Page	<i>170</i>	<i>280,170</i>	<i>\$15,692,307</i>
Grand Total	<i>260</i>	<i>35,209</i>	<i>\$24,000,000</i>

Name of person who prepared this report: *William Shepard*
 Title: *Contracts Administrator* Phone #: *315.464.4680*
 Preparer's Signature: *William Shepard*
 Date Prepared: *2/15/17*

EXHIBIT X

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: *SUNY Upstate Medical Univ.*
 State Agency Department ID: *3320211* Agency Business Unit: *28110*
 Contractor Name: *Sundelt Staffing, LLC* Contract Number: *C504276*
 Contract Start Date: *5/1/17* Contract End Date: *4/30/20*

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
<i>Pharmacist</i>	<i>10</i>	<i>7,770</i>	<i>\$923,077</i>
<i>Pharmacy Technician</i>	<i>10</i>	<i>1,508</i>	<i>\$923,077</i>
<i>Physical Therapist</i>	<i>10</i>	<i>10,684</i>	<i>\$923,077</i>
<i>Physical Therapist Assistant</i>	<i>10</i>	<i>13,495</i>	<i>\$923,077</i>
<i>Radiation Therapist</i>	<i>10</i>	<i>10,466</i>	<i>\$923,077</i>
<i>Radiological Technologist</i>	<i>10</i>	<i>16,026</i>	<i>\$923,077</i>
<i>Respiratory Therapist</i>	<i>10</i>	<i>13,495</i>	<i>\$923,077</i>
<i>Sonographer</i>	<i>10</i>	<i>10,911</i>	<i>\$923,077</i>
<i>Speech Language Pathologist</i>	<i>10</i>	<i>10,684</i>	<i>\$923,077</i>
Total this Page	<i>90</i>	<i>95,039</i>	<i>\$8,307,693</i>
Grand Total	<i>260</i>	<i>375,209</i>	<i>\$24,000,000</i>

Name of person who prepared this report: *William Shepard*
 Title: *Contracts Administrator* Phone #: *315.464.4680*
 Preparer's Signature: *[Signature]*
 Date Prepared: *2/15/17*