## DOHO1-5033285-3450000

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: NYS Department of Health Contractor Name: Shahabuddin Ahmad, MD Contract Start Date: 1/1/2019

Agency Code: 12000 Contract Number: S033285 Contract End Date: 12/31/2019

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Physicians and Surgeons	1	540	\$40,500
Total this page	1	540	\$40,500
Grand Total	1	540	\$40,500
		010	ψ <del>1</del> 0,000

Name of person who prepared this report: Shahabuddin Ahmad, MD

Title: Sole Proprietor

hmad Preparer's Signature: 12/18

Phone #: 917-370-1331

Date Prepared: / /

(Use additional pages, if necessary)

Page of