Form A

State Consultant Services – Contractor's Planned Employment From Contract State Date Through the End of the Contract Term

State Agency Name:	SUNY Upstate Medical University	Agency Code:	28110 3320211
Contractor Name: Contract Start Date	18/00/10-00 11/00	Contract Number: Contract End Date:	C-504434

Employment Category/Description	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
59-1062.00 Phys.can		2,080	#340,065
Total This Page	A.	3080	4340,265
Grand Total	1	2,080	\$340 DOS

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Name of person w	ho prepared this report Barbara Jasinski
Title: Sen 07	Contracts Adm. n Phone #: 315-464-4680
Preparer's Signatu	re Barbana 9, gap, NOK,
Date Prepared:	11/29/18