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: Traca Tournation

Agency Code: 12000 Contract Number: \$\phi 34846\$

Contract Start Date:09 01/2019

Contract End Date 08/31/2022

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
13.1151,00	5	13,822	\$910000.00
			2
Total this page	0	0	\$ 0.00
Grand Total	5	13,822	\$ 910,000.0

lotal this page	0	0	\$ 0.00	
Grand Total	5	13,822	910,000,00	
Name of person who prepared th	is report: John	n S. Lyons		
Title: President		Phone #	(312) 209 - 49	40
Preparer's Signature:		•		10
Date Prepared: 1000/2019				
(Use additional pages, if necessar	ary)		Page of	