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: SUNY STONY BROOK UNIV. MC

Agency Code: SN4013320215

Contractor Name:

CARELINE SERVICES INC.

Contract Number: C011366

Contract Start Date: 1201/19

Contract End Date: 11/3022

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
NURSING(CNAs&RNs)	120	11,705	690,122.68
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0		-	
Total this page	0	0	\$ 0.00
Grand Total	120	11,705.00	\$ 2,090,368.04

Name of person who prepared this report: DAVID LAWLER

Title: GENERAL MANAGER

Preparer's Signature:

Date Prepared:06/19/2019

(Use additional pages, if necessary)

\$2,/33,/ Phone #:212-686-8881

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