OSC Use Only:	
Reporting Code:	
Category Code:	
Date Contract Appro	ved:

FORM A

State Consultant Services - Contractor's Planned Employment From Contract Start Date Through The End Of The Contract Term

State Agency Name: State University of New York at Story Brock University Agency Code: 28050. Contractor Name: Flexible Business Systems Contract Number: Coll 383 Contract Start Date: 12 1/6 1/9 Contract End Date: 12 1/5 21		2/090
Contract Start Date: 2 1/6 1/6	State Agency Name: State University of New You	K at Story Brock University Agency Code: 28050 -
Contract Start Date: 12 1/6 1/9 Contract End Date: 12 1/5 1 21	Contractor Name: Flexible Business System	Contract Number: Coll 383
	Contract Start Date:/2 1/4 1/9	Contract End Date 12 1/5 / 2/ 330015

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
15-1151.00	1	4,160	141,440.
15-1151.00 Comptoolser Sport Spricksts			
Total this page			
Grand Total			

Grand Total		
Name of person who prepared this report: Mort	y Schmitt.	
Title: $\sqrt{\rho}$	Phone #: 63/	815/720
Preparer's Signature:		
Date Prepared:/2 //6//9		

(Use additional pages, if necessary)

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