Ex			37
HV	hil	211	×

OSC Use Only

Reporting Code:

Category Code:

Date Contract Approved:

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	sity	Agency Code:	28110
Contract or Name: Contract Start Date	Pediatric Sërvice Group,	_	ontract Number: ontract End Date:	C-504806 October 31, 2023
W	Number	of	Number of hours	Amount Payable

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29-1065.00	1	5200	\$.943,115
			0.00
У			
Total This Page		~300	0//2 1/5
	1	5200	\$993,115
Grand Total	s 1	5200)	\$ 943, 115

Name of person who prepared this report:	eo Sawyer	5
Title: Practice Administrator	Phone #:	315-464-5450
Preparer's Signature		1
Date Prepared: 9/13/19		
(Use additional pages if necessary)		Page 1 of 1