AC 3271-S (Effective 4/12)

## FORM A

## New York State Consultant Services **Contractor's Planned Employment**

From Contract Start Date Through the End of the Contract Term

State Agency Name: SUNYUpstate Medical University

State Agency Department ID: 28110

Agency Business Unit: 3320211

Contractor Name:University Surgical Associates, LLP. Contract Number: C-504958

Contract Start Date: 01/01/2019

Contract End Date: 12/31/2023

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract	
29-1067.00 Surgeon	1.00	8760	\$2,014,800.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Λ	0.00	0.00	\$0.00	
Total this Page	1.00	8760.00	\$ 2,014,800.00	
Grand Total	1.00	8760.00	\$2,014,800.00	

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Name of	person	who prep	ared this r	eport: )	envitie	Poller
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Preparer's Signature:

Phone #: 315-464-6271

Date Prepared: 12 1361 19

(Use additional pages, if necessary)

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