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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 Univer	sity Agency Code:	28110
Contractor Name: Contract Start Date	Pediatric Service Group,	LLP Contract Number: Contract End Date:	C/K-505057 August 31, 202

	Number of	Number of hours	Amount Payable
Employment Category	Employees	to be worked	Under the Contract
29-1065.00	1	6240	\$ 745,500
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	(4)		
Total This Page	1	6240	\$745,500
Grand Total	1	6240	\$ 795,500

Name of person who prepared this report:	Leo Sawyer
Title: Practice Administrator	Phone #: 315-464-5450
Preparer's Signature	m
Date Prepared: 3 (20 2020)	• 
(Use additional pages if necessary)	Page 1 of 1_