OSC Use Only
Reporting Code:
Category Code:
Date Contract Approved:

Form	Α
LOHH	\Box

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 Agency Code: 28110

Contractor Name: Psychology Family Package Contract Number: C-505159

Contract Start Date 1/20/20 Contract End Date: 1/20/2-3

Employment Category/Description	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Psychiaty Murse Packitioner 29-1171-00	1	20801 yr	* 452, 556
29-1171-00		8	
Total This Page	(2080ly	-45 3,5 56
Grand Total		2080ly 2080ly	1450,556

	9	
Name of person who prepared this report		
Title: Prechu Marzer Preparer's Signature Oliuml	Phone #: 315-424-3119	
Preparer's Signature Olium		
Date Prepared: i 122	_	