

Exhibit X

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

State Consultant Services - Contractor's Planned Employment From Contract Start Date Through The End Of The Contract Term
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State Agency Name: <u>SUNY Upstate Medical University</u>	Agency Code: <u>28110</u>
Contractor Name: <u>Dept of Medicine, MSG</u>	Contract Number: <u>C-505789</u>
Contract Start Date: <u>7/1/21</u>	Contract End Date: <u>6/30/26</u>

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
<u>29-1216.00</u>	<u>.125</u>	<u>1,300</u>	<u>359,100</u>
Total this page			
Grand Total			<u>359,100</u>

Name of person who prepared this report: Matthew Hutz

Title: Chief Administrator Phone #: 315-464-8282

Preparer's Signature: [Signature]

Date Prepared: 10/25/21