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

FORM A

State Consultant Services - Contractor's Planned Employment

From Contract Start Date Through The End Of The Contract Term

State Agency Name: NYS Department of Health Contractor Name: Anita K. Burock Stotts, MD

Agency Code: 12000 Contract Number: S038053

Contract Start Date: 1/1/2023

Contract End Date: 12/31/2023

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Physicians and Surgeons	1	540	\$54.000.00
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Total this page	1	540	\$54,000.00
Grand Total	1	540	\$54.000.00

Name of person	n who prepared th	nis report: Anlta	١K.	 Burock Stotts. 	. MD
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Title: Sole Proprietor

Phone #: 518-527-7179

Preparer's Signature: Gmita K. Burack Storrs MJ Date Prepared 22/14/2022

(Use additional pages, if necessary)

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