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: Gregory J. Strizich, MD

Contract Start Date: 1/1/2023

Agency Code: 12000

Contract Number: S038061

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	720	\$72,000.00
			· · · · · · · · · · · · · · · · · · ·
Total this page	1	720	\$72,000.00
Grand Total	1	720	\$72,000.00

N	ame of	person who	prepared this r	eport: Gregor	ry J. Strizich, MD
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Preparer's Signature: Irregory J. Attitude MD

Date Prepared: //2/20/2 Z

(Use additional pages, if necessary)

Phone #: 518-441-3679

Page 1 of 1