

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

State Agency Name: State University of New York Contractor Name: Research Foundation of SUNY on behalf of 655 System Administration-Provost Contract Start Date: 2/1/21	Agency Code: Contract Number: Contract End Date: 1/31/26
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Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
27-2012.03	2	5 year period	\$639,823
No payroll expenditures budgeted			
Total this page			
Grand Total			\$639,823

Name of person who prepared this report: Jay Barclay
 Title: Operations Manager
 Preparer's Signature: _____
 Date Prepared: _____
 Phone #: 518-434-7174

(Use additional pages, if necessary)