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 State Date Through the End of the Contract Term

State Agency Name: <u>SUNY Upstate Medical University</u> Agency Code: <u>28110</u>

Contractor Name: Upstate Family and Preventive Contract Number: <u>C-505290</u>

Medicine, Inc.

Contract Start Date 7/1/2020 Contract End Date: 6/30/2025

Employment Category/Description	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
29-1069.09 Preventive Med. Physicians	1.30 FTE	2704	\$1,627,210
		4,700	
Total This Page			
Grand Total			\$1,627,210

Name of person wl	no prepared this report	cara Dailey		
Title: CONTOUR.	Administrator	A A A A A Phone #:	315-444-4482	
Preparer's Signatur	·e	Common mass		
Date Prepared:	8/14/2020	<i>J</i>		