

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

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
 Agency Code: 12000
 Contractor Name: Gregory J. Strizich., MD Contract Number: S037684
 Contract Start Date: 6/1/2022 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	900 \$67,500
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Total this page	1	900 \$67,500
Grand Total	1	900 \$67,500

Name of person who prepared this report: Gregory J. Strizich, MD
 Title: Sole Proprietor Phone #:
 Preparer's Signature: *Gregory J. Strizich MD*
 Date Prepared: 7/6/22
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