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: Anne Marie Stilwell, MD PC

Agency Code: 12000

Contract Number: S038054 X-1

Contract Start Date: 1/1/2024

Contract End Date: 12/31/2024

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Physicians and Surgeons	1	360	\$36.000.00
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Total this page	1	360	\$36.000.00
Grand Total	1	360	\$36.000.00

Name of person who prepared this report: Anne	Marie Stilwell, MD PC	
Title: Sole Proprietor  Preparer's Signature:  11 11 12 12 14 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16	Shinell Mas 1/ Phone#	7185410745
Preparer's Signature:	- u	
Date Prepared: 0/10/1/014		. E
(Use additional pages, if necessary)		Page 1 of 1