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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: SUNY Upstate Medical University

Agency Code:

28110

Contractor Name: PSYCHIATAY FACULTY PRACTICE. NX Contract Number: C/x- 506 745

Contract Start Date

Contract End Date: 4/32/24

Employment Category/Description	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
HOSATALISTS - GH+CH	IDETE	20,800	# 3\$65, C&3
19-3039.00			
Total This Page			
Grand Total	IDFTE	20,800	* 3,865,443

Name of person who	prepared this report THERES	SA J. WESTON	
Title: CFO		Phone # (3/5) 464-3/19	
Preparer's Signature	Thresaf Wester		
Date Prepared:	2/19/34		