

## FORM A

**New York 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

State Agency Department ID: 3320211

Contractor Name: Ankura Consulting Group, LLC

Contract Start Date: 11/22/2024 TBD

Agency Business Unit: SNY01

Contract Number: C507193


Contract End Date: 11/21/2025 TBD

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Analysis	5	900	\$350,000.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
	0.00	0.00	\$0.00
Total this Page	0.00	0.00	\$ 0.00
Grand Total			\$350,000.00

Name of person who prepared this report: Mark Furgeson

Title: Senior Managing Director

Phone #: 212.818.1555

Preparer's Signature: 

Date Prepared: 06/25/2024

(Use additional pages, if necessary)

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Available on-line at:

<http://www.osc.state.ny.us/agencies/forms/>

use AC 3271 S for Form A  
and AC3272 S for Form B