

Exhibit X

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: Upstate Neurosurgery, LLP Contract Number: C-507421
Contract Start Date: 04/02/2025 Contract End Date: 04/01/2030

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Neurosurgeon	1	1560 over 5 years	\$562,200 over 5 years
Total this page			
Grand Total			\$562,200 over 5 years

Name of person who prepared this report: Tracey Hamilton

Title: Practice Administrator Phone #: 315-464-9375

Preparer's Signature: 

Date Prepared: 9/17/25

(Use additional pages, if necessary)

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