State Consultant Services

FORM A

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

Contractor's Planned Employment
From Contract Start Date through End of Contract Term

New York State Department of Health — Agency Code ~~12000~~ DOH01 - E 3450000
Contractor Name: Bio-Reference Laboratories, Inc. — Contract Number: C030564

Contract Start Date: 08/01/2015 — Contract End Date: 07/31/2020

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Phlebotomist			
Job CODE: 29-2012.00	4	333 TOTAL HRS ANNUALLY	$300,000 (TOTAL 5 YR TERM)*
		83.25 HRS PER EMPLOYEE ANNUALLY	$60,000 ANNUALLY*
			*ALL SERVICES: TESTING + PHLEBOTOMY
Totals this page:	0	0	$ 0.00
Grand Total:	0	0	300,000 ~~$ 0.00~~

Name of person who prepared this report: VINCENT F. PORCELLI

Title: DIRECTOR, MANAGED CARE & CONTRACTS

Phone #: 201-791-2600 EXT. 8745

Preparer's signature: Vincent F. Porcelli

Date Prepared: 09/30/2015

Page 1 of 1
(use additional pages if necessary)