Exhibit X

OSC Use Only: Reporting Code: Category Code: CULA 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 U	Iniversity Agency Code: 28110 3320211
Contractor Name: Stat Staff	Contract Number: C 503945
Contract Start Date: 10/1/15	Contract End Date: <u>9/30/16</u>

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Registered Nurses	2	8.3.3	\$ 75,000
Operating Room Techs	2	1,190	\$75,000
Total this page Grand Total	4	2,023	\$ 150,000

William Shepar Name of person who prepared this report: Phone #: 315-464-4680 Title: Contracts strato M Preparer's Signature: Date Prepared: ____ 2 (1 15

(Use additional pages, if necessary)

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