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: NYS OPWDD BRDDSOO

Contractor Name: Ivan Fras, M.D.

Agency Code: 51940/3660230 Contract Number: \$0SBR00083

Contract Start Date: 11/01/2016

Contract End Date: 10/31/2021

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
31-1012.00	17 136	384	449,076.44
	- (myself orly) -		
	-/ gwnea		15
	1= sole orner		
			9 8
		/	
5			
Total this page	/ 0	0	\$ 0.00
Grand Total	(384	+ 449,076,44

Grand Total	384 999076.7
Name of person who prepared this repo	rt:
Title: Psychiatrist	Phone #: 607-722-3023
Preparer's Signature:	9
Date Prepared: 04/19/2017	

(Use additional pages, if necessary)