

SUNY-C504612-3320211

EXHIBIT X

FORM A

<b>New York State Consultant Services</b> <b>Contractor's Planned Employment</b> From Contract Start Date Through the End of the Contract Term	CUB B-1
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State Agency Name: <i>SUNY Upstate Medical Univ.</i> State Agency Department ID: <i>3320211</i> Contractor Name: <i>Pediatric Service Group, LLP</i> Contract Start Date: <i>4/1/2018</i>	Agency Business Unit: Contract Number: <i>C-504612</i> Contract End Date: <i>3/31/2023</i>
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Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
<i>Psychologist 19-3031.02</i> <i>(nny)</i>	<i>1</i>	<i>7,800</i>	<i>\$506,700.00</i>
Total this Page	<i>1</i>	<i>7,800</i>	<i>\$506,700.00</i>
<b>Grand Total</b>	<i>1</i>	<i>7,800</i>	<i>\$506,700.00</i>

Name of person who prepared this report: *William Shepard*  
 Title: *Contracts Administrator* Phone #: *315*  
 Preparer's Signature: *William Shepard*  
 Date Prepared: *1/16/2019*