

EXHIBIT X

FORM A

<p><b>New York State Consultant Services</b>  <b>Contractor's Planned Employment</b>          From Contract Start Date Through the End of the Contract Term</p>
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State Agency Name: SUNY Upstate Medical Univ.	
State Agency Department ID: 3320211	Agency Business Unit: 28110
Contractor Name: Psychiatry Faculty Practice, Inc.	Contract Number: C-505397
Contract Start Date: 8/1/2020	Contract End Date: 7/31/2025

Employment Category	Number of Employees	Number of Hours to be Worked	Amount Payable Under the Contract
Psychiatrist	1	5,200	\$900,000.00
Total this Page	1	5,200	\$900,000.00
<b>Grand Total</b>	1	5,200	\$900,000.00

Name of person who prepared this report: William H. Shepard  
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 Preparer's Signature: *William H. Shepard*  
 Date Prepared: /4 /7 20