Consultant Disclosure Form A

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: City University of New York	Agency Code: CNY01
Contractor Name: Research Foundation of CUNY	Contract Number: C171812
Contract Start Date: 07/01/2017	Contract End Date: 06/30/2018

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
MOU# 017-054 (RF 50134-0005)			
27-2012.03 Program Directors	1	10	$1,012.00
11-3031.00 Financial Managers	2	233	$11,439.00
25-9031.00 Instructional Coordinators	1	42	$1,549.00
13-1199.00 Business Operations Specialists, All Other	9	4922	$262,045.00
Total this page			
Grand Total	13	5206	$276,045.00

Name of person who prepared this report: Yong Hwang

Title: Manager, Grants and Contract **Phone #:** 212-417-8490

Preparer's Signature: _____

Date Prepared: 11/20/18

(Use additional pages, if necessary)