Western New York Developmental Disabilities Service Office 3660242

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OSC Use Only:
Reporting Code:
Category Code:

State Consultant Services Contractor's Annual Employment Report

Contract	tor's Annual Emplo	syment Report	
Report Per	iod: April 1, 2018 t	o March 31, 2019	
			•
Contracting State Agency Name: Contract Number: S0SWN00050 Contract Term: 01/01/2016 to 12/3 Contractor Name: Ewen Macphers Contractor Address: 2115 Lapham Description of Services Being Prov	1/2020 son, MD n Road East Aurora,	NY 14052	le: 51330 34,407 YL
Data Processing Computer Prog Engineering Architect Services Health Services Mental Health Services	arch ☐ Training ☐ gramming ☐ Othe ☐ Surveying ☐ ervices ⊠] r IT consulting Environmental Service Other Consulting	<u> </u>
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1066.00	j	289.5 4	/ / / > 4
29-1071.00 PA (if applicable) 29-1171.00 NP (if applicable)			
Total this page	0	0	\$ 0.00
Grand Total		289.5	50,662.50
Name of person who prepared this Preparer's Signature: Title: M. D. Date Prepared: 5 / 6/ 2019 Use additional pages if necessary)	epherson	CPHCR SUM one #: 7/6 532	7 7 7 9 Page of

FORM B

New York State Consultant Services Contractor's Annual Employment Report

Report Period: April 1, 2018 to March 31, 2019

Contracting State Agency Name: OPWDD

Contract Number: SOSWN00149

Agency Business Unit: OPD01

Contract Term: 31/01/18 to 02/28/2023

Agency Department ID: 3660242

Contractor Name: Dr. DEVINALINI MISIR

Contractor Address: 6, HIDDEN MEADOWS ORCHARD PARK NY 14127

Description of Services Being Provided: PSYCHIATRIC SERVICES

Scope of Contract (Choose one that b	est fits):			
☐ Analysis ☐ Evaluation ☐ Research ☐ Training				
☐ Data Processing ☐ Computer Programming ☐ Other IT consulting				
☐ Engineering ☐ Architect Services	Surveying	☐ Environmental	Services	
☐ Health Services ☐ Mental Health	Services		•	
☐ Accounting ☐ Auditing ☐ Paralegal ☐ Legal ☐ Other Consulting				
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract	
Self Employed	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
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	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
	0.00	0.00	\$0.00	
Total this Page	0.00	0.00	\$ 0.00	
Grand Total	0.00		\$0.00	

Name of person who prepared this re-	OOM: devinalini misir

Title: MD

Phone #: 2072284933

Preparer's Signature:

Date Prepared: 05/01/2019

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OSC Use Only:	
Reporting Code:	
Category Code:	

	riod: April 1, 2018 t		
Contracting State Agency Name: Contract Number: S0SWN00149 Contract Term: 03/01/2018 to 02/ Contractor Name: Dr. Devinalini I Contractor Address: 6 Hidden Me Description of Services Being Pro	28/2023 Misir eadow Orchard Park,	NY 14127	e: 3660747
Data Processing Computer Pro	earch ☐ Training ☐ ogramming ☐ Othe □ Surveying ☐ Services ☒	Triconsulting Environmental Service Other Consulting	s 🗖
Employment Category	Number of Employees	Number of Hours Worked	Amount Payable Under the Contract
29-1066.00	0)
29-1071.00 PA (if applicable)	Ò	0	Λ
29-1171.00 NP (if applicable)	<u> </u>	0	<u> </u>
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