OSC Use Only: Reporting Code: (LE Category Code:

FORM A OPDOI - SOSW 100149 - 3660242 Date Contract Approved:

State Consultant Services - Contractor's Planned Employment From Contract Start Date Through The End Of The Contract Term

State Agency Name: NYS OPWDD Central NY Contract **HUB Office**

Contractor Name: Dr. Devinalini Misir

Contract Start Date: 03/01/2018

Agency Code:

51330/3660242

Contract Number: S0SWN00149

Contract End Date: 02/28/2023

| Employment Category 31-1012.00 | Number of Employees | Number of hours to be worked | Amount Payable |
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|---|-----------------|----------|
| Name of person who prepared this report: Title: | DEVINALINI MIST | |
| Preparer's Signature: V | Phone #: | ii id |

Preparer's Signature:

Date Prepared() 2/14/19 (Use additional pages, if necessary) 2072284933