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NEW YORK STATE
CONSOLIDATED FISCAL REPORT
For the Period: January 1, 2015 to December 31, 2015

SCHEDULE CFR-4A
CONTRACTED DIRECT
CARE AND CLINICAL
PERSONAL SERVICES

Page _____

AGENCY NAME: _____
 AGENCY CODE: _____
 SCHOOL CODE: (SED ONLY) _____

Refer to Appendix R for Position Title Codes and definitions.

Report only program/site specific positions (Position Title Codes 200-399 series).

[illegible]

Totals are transferred to Schedule CFR-1 Line 35 (Program/Site).

Rev. **CFR-4A**
Nov. 2015