

**ATTACHMENT H
Consultant Disclosure Form A**

OSC Use Only:
Reporting Code:
Category Code:
Date Contract Approved:

FORM A

AUDIT ID: OMH01-CM100205AN-3650547

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

State Agency Name: NYS Office of Mental Health
Contractor Name: LocumTenens.com - S. Dabo

Agency Code: 3650000
Contract Number: OMH01-
CM100205AN-3650547

Contract Start Date: 10/11/2018

Contract End Date: 9/4/2023

| Employment Category ¹ | Number of Employees | Number of hours to be worked | Amount Payable Under the Contract |
|----------------------------------|---------------------|------------------------------|-----------------------------------|
| 29-1066-00 | 1 | 7552 | \$1,791,712.00 |
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| Total this page | 0 | 0 | |
| Grand Total | 1 | 7,552 | \$1,791,712.00 |

Name of person who prepared this report: Jessica McDonald

Title: Contract Management Specialist Trainee

Phone #: (518) 549-5224

Preparer's Signature: *J. McDonald*

Date Prepared: 10/2/2018

(Use additional pages, if necessary)

1. (Note: Access the O*NET database, which is available through the US Department of Labor's Employment and Training Administration, on-line at online.onetcenter.org to find a list of occupations.)