

**ATTACHMENT H
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: NYS Office of Mental Health	Agency Code: 3650000
Contractor Name: Parsons Children && Family Center	Contract Number: OMH01- C101032-3650000
Contract Start Date: January 1, 2020	Contract End Date: December 31, 2021

Employment Category ¹	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Senior Training Program Spec.	1	1950/yr (37.5/wk)	\$135,227.24
Total this page	0	0	
Grand Total			

Name of person who prepared this report: **Antoinette Bradley**
 Title: **Contract Specialist** Phone #: **518-426-2635**

Preparer's Signature: *Antoinette Bradley*
 Date Prepared: *2/10/2020*

(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.)